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AUG 20 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CODDODATION.	NEXTER	A MEDICAL SOL	UTIONS CORP
NAME OF CORPORATION: _ DOCUMENT NUMBER:	P1200	0086577	
The enclosed Articles of Amendm	ent and fee are su	bmitted for filing.	11 - 12 - 13 - 14 - 14 - 14 - 14 - 14 - 14 - 14
Please return all correspondence co	oncerning this ma	tter to the following:	
VINCE	E SAMM	ARCO	
		Name of Contact Persor	1
2100 (CORAL \	Firm/ Company NAY, SUITE #	 #603
	I, FL 331	Address	
	·	City/ State and Zip Code	•
vince@m E-mail		om sed for future annual report	notification)
For further information concerning	this matter, pleas	se call:	
Vince Sammarco		at (305	858-1290
Name of Contact P	erson	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following	ng amount made	payable to the Florida Depa	artment of State:
-	75 Filing Fee & ficate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	tion porations	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation

FILES

Nextera Medical Solutions Corp.

(Name of Corporation as currently filed with the Florida Dept. of State)

P12000086577

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new na	me of the corporation:		
			The new
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the designo word "chartered," "professional associal	ation "Corp," "Inc," or	"Co". A professional corp	
B. Enter new principal office address, i	f applicable:	2100 Coral '	Way
(Principal office address <u>MUST BE A ST</u>		Suite #603	
		Miami, FL 3	3145
C. Enter new mailing address, if applie		2100 Coral	Way
		Suite #603	
		Miami, FL 3	3145
D. If amending the registered agent an new registered agent and/or the new Name of New Registered Agent		ess:	name of the
		Way, #603	
	(Florida	street address)	_
New Registered Office Address:	Miami	, Flori	_{ida} 33145
	(Ci	ry)	(Zip Code)
	0/3		
New Registered Agent's Signature, if ch			iona of the monition
I hereby accept the appointment as registr	ered agent. Tam jamilia	r-with and accept the obligat	ions of the position.
$-\mathcal{U}_{Sic}$	gnature of New Registere	d Agent if changing	_
5.2	, coj rien riegistere	a reality of comments	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	Antonio Primo	2100 CORAL WAY
X			Suite #603
Remove			Miami, FL 33145
2) Change	VP	Dennis Bonneau	2100 Coral Way
$\frac{\mathbf{X}}{\mathbf{Add}}$			Suite #603
Remove			Miami, FL 33145
3) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	- 		
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)
<u>-</u>	
	,
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: August 12, 2013 ate this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated August 12, 2013	
· ·	
Signature	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiductary by that fiduciary)	
Antonio Primo	
(Typed or printed name of person signing)	
Vice-president	

(Title of person signing)