D12000101289

	equestor's Name)	
	- - ,	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nar	me)
(D	ocument Number))
Certified Copies	Certificate:	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	nlv

Angerta No. 4 P.



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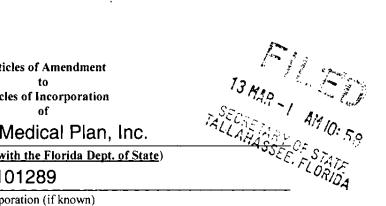


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ORANGE	E MEDICAL PLA	N, INC
DOCUMENT NUMB	ER: P120001012	189	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Nelsy Alvarez		
-	<u> </u>	Name of Contact Person	n
	Orange Medical I	Plan, Inc	
-		Firm/ Company	
	18400 NW 75 Pla	ace, Suite #110	
•		Address	
_	Hialeah, FL 330	15	
		City/ State and Zip Cod	e
nels	syalvarez@bellso	uth.net	
		sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Nelsy Alvarez	2	at (<u></u> 305	823-4005
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate 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)
Ame Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Eassee, FL 32301

Articles of Amendment Articles of Incorporation



Orange Medical Plan, Inc.

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

P12000101289

(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

	corporation," "company," or "incorporated" or the
.corp.," "Inc.," or Co.," or the designation "Corp," " ord "chartered," "professional association," or the abb	"Inc," or "Co". A professional corporation name must previation "P.A."
Enter new principal office address, if applicable:	18400 NW 75 Place, Suite #110
rincipal office address <u>MUST BE A STREET ADDRE</u>	Miami, FL 33015
Enter new mailing address, if applicable:	40400 1944 77 79
	18400 NW 75 Place, Suite #110
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Miami, FL 33015
	Miami, FL 33015
If amending the registered agent and/or registered onew registered agent and/or the new registered office. Name of New Registered Agent Name of New Registered Agent	office address in Florida, enter the name of the ce address:
If amending the registered agent and/or registered onew registered agent and/or the new registered office. Name of New Registered Agent Name of New Registered Agent	Miami, FL 33015

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.

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Arnaldo Fernandez-Baca	6700 Cypress Road, #405
Add			Plantation, FL 33317
X Remove			
2) Change	CEO	Nelsy Alvarez	18400 NW 75 Place #110
X Add			Hialeah, FL 33015
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessa	l Articles, enter change(s) here: ary). (Be specific)	
f an amendment provides for an provisions for implementing the (if not applicable, indicate N/A	exchange, reclassification, or cancellation of issued shares,	
(у погиррисионе, таксие пог	A)	
		-
		-

The date of each amendment(s) adoption:
Effective date <u>if applicable</u> :	February 26, 2013
Effective date it appressive.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were by the shareholders was/wer	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	approved by the shareholders through voting groups. The following statement of 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 action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated Feb	ruary 26, 2013
Signature	Wels aluceen.
sel	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Nelsy Alvarez
	(Typed or printed name of person signing)
	CEO
	(Title of person signing)