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JAN 02 2014 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Doctors Services Management, In
DOCUMENT NUMBER: P13000027254
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Pedro Hemandez Name of Contact Person
Loctors Services Magement, Inr. Firm/Company
6355 NW 36 Street #604
Virginia Gardens FZ 33166
City/ State and Zip Code Phenodezhealth care a hotmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Peda Hernadez at (786) 543 4327 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Street Address

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to of Incorporation

Articles of incorporation
20ctors Services Management Anc.
(Name of Corporation as currently filed with the Florida Dept. of State)
P1300002725SPARIAN OF STATE
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

D. <u>If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:</u>
new registered agent andror the new registered office address.
Name of New Registered Agent PECIO TEMANCEZ
6355 NW 36 Street #604
(Florida street address)
New Registered Office Address: Virginia Gardens Fz, Florida 33166
(City) (Zip Code)
Nam Dagistaned Agentia Cianatura if sharping Dagistaned Agent.
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I ap familiar with and accept the obligations of the position.
West 1
Signapure of New Registered Ngent, if changing

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	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	ones	
X Add	SV Sally S	mith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	PD	Hernandez, Delyan	6355 NW 36 STREET #604
Remove	277	11 . (- D)	Virginia Gardens, FZ 23161 6355 NW 36 Street
2) Change	P.D.T	Herrandez, Pedro	#604
Remove 3) Change			Virginia Cardens, 12 33166
Add Remove			
4) Change			
Add Remove			
5) Change			
Remove			
6) Change			
Add Remove			

amending or adding additional Artitach additional sheets, if necessary).	(Be specific)
<u></u>	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	numerical not contained in the amendment user.
	· · · · · · · · · · · · · · · · · · ·

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):	
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	
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by the shareholders was/were sufficient for approval. The amendment(s) was/were approved by the shareholders through voting groups. The following statement	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(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	
Signature Joseph Signature	
/ By a director, president or other officer – if directors or officers have not been	_
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Pedro Hemander	
(Typed or printed name of person signing)	
Mesident	_
(Title of person signing)	