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Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN MY CLINIC INTEGRAL MEDICAL CENTER INC

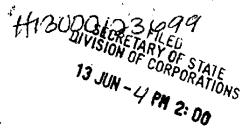
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#### ARTICLES OF AMENDEMENT

TO

# ARTICLES OF INCORPORATION OF VOLUME INTEGRAL MEDICAL CENTER I

MY CLINIC INTEGRAL MEDICAL CENTER INC DOC #P18000034596

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of incorporation:

FIRST: Amendment(s) adopted: indicated article number(s) being amended, added or deleted

### ARTICLE VI

The board of Directors will be amended as follows:

DELETE: ENRIQUE URBINA, VP 7900 SW 114 AVE #204 DORAL, FL 33178

DELETE: ENRIQUE J. PEREZ, REGISTERED AGENT 11880 SW 19 TEAR #121 MIAMI, FL 33175

THE NAME AND ADDRESS OF THE NEW REGISTERED AGENT: YUSDEIVYS PEREZ 11880 SW 19 TERR #121 MIAMI, FL 33175

SECOND: If an amended provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each amendment's adoption: 05/17/2013

FOURTH: Adoption of amendment(s) (check one)

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_X_ the amendm votes cast for the au	eni(5) was/were approved by the shareholders. The number of neudineni(8) was/were sufficient for approval.
the amendme voting groups,	ent(s) was/were adopted approved by the shareholders through
The following states vote separately on th	nent must be separately provided for each voting group entitled to e amendment(\$).
The number of vote	is east for the amendment(s) was/were sufficient for approval by
(Voting group)	
the amondme abareholders action	ut(s) was/were adopted by the board of directors without and shareholder action was not required.
	i(s) was/were adopted by the incorporators without shareholder der action was not required.
Signed this May,17,	2013
Signature	25/2/2
	YUSDEIVYS PEREZ
(By the chairman	or Vice Chairman of the board of Directors, President or other officer if adopted by the shareholders)  OR
	(By a director if adopted by the directors)
	OR
Note:	•
	and the state of t

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### REGISTERED AGENT ACCEPTANCE

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Signature of Registered Agent

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