## P13000065709

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
; (Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	_
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02/24/14--01032--015 \*\*35.00

14 FEB 24 PH 2: 07 SECRETARY OF STATE

C. LEWIS
FEB 2 5 2014
EXAMINER

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	RATION: Medical Ma BER: P1300006570		s INC	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	Robert Abiusi			
		Name of Contact Person	1	
	Medical Marketin	g Solutions		
	<u></u> -	Firm/ Company		
	228 Lone Pine D	rive		
		Address		
	Palm Beach Gard	dens, FL 33410		
		City/ State and Zip Cod	e	
rob	.abiusi@gmail.co	m		
-		sed for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
Rob Abiusi		at (561	, 719-4581	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check fo	r 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301		

APPROVED AND FILED

## **Articles of Amendment** to Articles of Incorporation of

14 FEB 24 PM 2: 07

SECRETARY OF STATE TALE AHASSEE, PLORIDA

Medical Marketing Solut	tions INC	TALI	AHASSEE, PLORIDA
(Name of Corporation a	s currently filed with th	e Florida Dept. of State)	
P13000065709			
(Docume	nt Number of Corporation	n (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, t	his Florida Profit Corporation adopts th	e following amendment(s) t
A. If amending name, enter the new n	ame of the corporation	1	
Pre Op Stop INC			The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," o	ation," "company," or "incorporated" or "Co". A professional corporation no on "P.A."	or the abbreviation
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address MUST BE A S			
			<del></del>
			<u> </u>
C. Enternew mailing address, if appl	icable:	N/A	
(Mailing address MAY BE A POST		IN/A	<del></del>
		ddress in Florida, enter the name of th	<u>e</u>
new registered agent and/or the ne		<u>'ess:</u>	
Name of New Registered Agent	N/A		
		street address)	
New Registered Office Address:	N/A	, Florida	<u> </u>
	(C	ity) (Zip	Code)
New Registered Agent's Signature, if c		ent: ar with and accept the obligations of the	position.
		of the	L
	anature of New Registers	ad Agant 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 <math>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>	<u>Addres</u> s
1) Change			
Add Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Remove			
6) Change			
Add			
Remove			

E. <u>If amendir</u> (Attach <i>add</i>	ng or adding ditional shee	g additional <i>i</i> ts, if necessar	Articles, enter y). (Be spec	r change(s) he rific)	ere:		
N/A							
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provision	ıs for implei	vides for an ementing the a	<u>imendment if</u>	lassification, not contained	or cancellation d in the amend	of issued shard ment itself:	es,
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··					1484		
	- ·				<del>_</del>		
					4477		

APPROVED. AND FILED

	1 1.	F-1L	EU
The date of each amendment(s) adoption	:2/15/14	14 FEB 24	PĦ 2: 0.7 if other than th
date this document was signed.  Effective date if applicable:	2/15/14	SECRETARY TALLAHASSI	' OF STATE EE, PLORIDA
	(no more than 90 days afte	r amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopted by by the shareholders was/were sufficient		votes cast for the amendme	nt(s)
The amendment(s) was/were approved to must be separately provided for each ve			ement
"The number of votes cast for the	amendment(s) was/were sufficien	for approval	
by	(voting group)	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
The amendment(s) was/were adopted by action was not required.	the board of directors without sh	areholder action and shareho	older
The amendment(s) was/were adopted by action was not required.	the incorporators without shareh	older action and shareholder	
Dated2/15	7/14		
selected, by an	president or other officer – if dire incorporator – if in the hands of ciary by that fiduciary)		
	ROBERT AB	31451	
	(Typed or printed nam		
	president		
	(Title of perso	n signing)	