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(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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And

AUG 06 2014

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MERIDIA	AN TREATMENT SOLUTIONS, INC.				
DOCUMENT NUMBER: P13000069					
The enclosed Articles of Amendment and fee a					
Please return all correspondence concerning thi	s matter to the following:				
HOTSE LANG	SERAAR				
	Name of Contact Person				
MERIDIAN TR	REATMENT SOLUTIONS, INC.				
	Firm/ Company				
4401 W TRAD	DEWINDS AVE, SUITE 201				
Address					
LAUDERDALE	LAUDERDALE BY THE SEA, FL 33308				
	City/ State and Zip Code				
HBL@MTSIUS.C	OM				
E-mail address: (to	be used for future annual report notification)				
For further information concerning this matter,	please call:				
HOTSE LANGERAAR	at (954) 5579505				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount n	nade payable to the Florida Department of State:				
■ \$35 Filing Fee					
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				

Articles of Amendment to Articles of Incorporation of

FILED 16 JUL 24 12 11: 01

to

MERIDIAN TREATMENT SOLUTIONS

MERIDIAN TREATMENT SOL	0110110		<u> </u>	_
(Name of Corporation as currently	filed with the Florida	Dept. of State)	可為。在蘇州為2001年,1	
P13000069216				_
(Document Number of	of Corporation (if know	n)		_
Pursuant to the provisions of section 607.1006, Florious Articles of Incorporation:	da Statutes, this <i>Florido</i>	a Profit Corporation	on adopts the following	ng amendment
A. If amending name, enter the new name of the	corporation:			
				The new
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	p, " "Inc, " or "Co".			
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD				_
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u>)			_
				_
D. If amending the registered agent and/or regist new registered agent and/or the new registere	ered office address in	Florida, enter the	e name of the	
Name of New Registered Agent				
	(Florida street add	iress)		
New Registered Office Address:		, Flo	orida	_
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Reliable I hereby accept the appointment as registered agent.	egistered Agent: . I am familiar with an	nd accept the oblig	ations of the position.	
				
Signature of	New Registered Agent,	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	<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	Р	Mark Korcok	4401 W Tradewinds Ave, #
Add			Lauderdale By The Sea
Remove			FL 33308
2) Change	Р	Hotse Langeraar	267 Avalon Avenue
Add			Lauderdale By The Sea
Remove			FL 33308
3) Change	S	Caren M Langeraar	267 Avalon Avenue
Add		-	Lauderdale By The Sea
Remove			FL 33308
4) Change		-	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

tach additional sheets, if necessary	rticles, enter change(s) he (Be specific)		
			
			
			
			<u></u>
	<u> </u>		<u>-</u>
		<u></u>	
			
an amendment provides for an e	change, reclassification, c	or cancellation of issued	shares.
rovisions for implementing the a	mendment if not contained	l in the amendment itself	:
(if not applicable, indicate N/A)			
			
_			
·			

The date of each amendment(s) adoption: July 21, 2014		
date this document was signed.		
Effective date if applicable: July 21, 2014		
(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"		
by"		
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_July 21, 2014 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)		
Hotse B. Langeraar		
(Typed or printed name of person signing)		
President		
(Title of person signing)	-	