

Dec. 4. 2014 4:28 PM

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P14-000032501

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
MIAMI MEDICAL CONCIERGE, INC.**

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FILED
14 DEC -4 PM 4:37



December 4, 2014

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MIAMI MEDICAL CONCIERGE, INC.
7600 SW 57TH AVENUE, SUITE 306
MIAMI, FL 33143

SUBJECT: MIAMI MEDICAL CONCIERGE, INC.
REF: P14000032501

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

PLEASE CHECK ONE OF THE BOXES UNDER (ADOPTION OF AMENDMENTS) ON PAGE 2 OF 2 OF THE DOCUMENT. YOU HAVE TWO BOXES CHECKED NOW AND IT SHOULD BE ONLY ONE BOX CHECKED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Darlene Connell
Regulatory Specialist III

FAX Aud. #: H14000279300
Letter Number: 614A00025566

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14 DEC -4 PM 5:03

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA 32314

((H14000279300 3)))

Articles of Amendment
to
Articles of Incorporation
of

MIAMI MEDICAL CONCIERGE, INC.

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

P14000032501

(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 its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

MEDICAL CONCIERGE INTERNATIONAL, INC.

The new

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)**

7600 SW 57TH AVENUE

SUITE 306

MIAMI, FL 33143

**C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)**

7600 SW 57TH AVENUE

SUITE 306

MIAMI, FL 33143

D. 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:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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The date of each amendment(s) adoption: Dec. 3, 2014, if other than the date this document was signed.

Effective date if applicable: Dec. 3, 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 _____"
(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 11/25/2014

Signature

Margaret Mahr

12/3/14

(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)

MAHR, MARGARETHE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

((H14000279300 3)))