

02/05/2033 08:21

#1152 0001/000

P/50000/5025

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000076825 3)))



H150000768253ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED
15 MAR 27 PM 4:59
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
MIAMI WELLNESS MEDICAL OFFICE INC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

FILED
15 MAR 27 PM 12:25
TALLAHASSEE, FLORIDA

Amend.

03-30-15

Electronic Filing Menu

Corporate Filing Menu

Help

Dr

H15000076825

Articles of Amendment
to
Articles of Incorporation
of

Miami Wellness Medical Office Inc.

Florida Document Number: P15000015025

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

Remove - Rosabel Machado as P

Add - Michael William Formisano as P
New Registered Agent:

Michael William Formisano

35 SW 114 Ave

Ste 201

Miami FL 33174

These articles of amendment were adopted on 03-26-15

The corporation has only one group of voting stock. This amendment was approved by the shareholders and the number of votes cast for amendment was sufficient for approval.

X [Signature]
Signature
Rosabel Machado President
Printed Name and Title

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]
Signature of New Registered Agent, if changing

H15000076825

FILED

15 MAR 27 PM 12:25

CLERK OF THE CIRCUIT COURT
IN AND FOR THE COUNTY OF MIAMI
FLORIDA