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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON:	etes and Wound C	are Netwo	ork.inc	
DOCUMENT NUMBER:		P16000044513			
The enclosed Articles of Am	endment and fee are su	ibmitted for filing.			
Please return all corresponde	ence concerning this ma	itter to the following	ng:		
	,	Andres Cazau			
<del></del> _		Name of Cont	act Person	1	
	Diabetes a	and Wound Care N	Setwork,Ir	1¢	
	··	Firm/ Con	npany		
	777 east 25 Street Suite 516				
	Address				
	Hialeah,Florida 33013				
		City/ State and	Zip Code	;	
		acazau@con	neast.net	Y	
	E-mail address: (to be u	=			
For further information cone Andres Caz			305	S89 6670	
Name of Contact Person		:. (		de & Daytime Telephone Number	
Enclosed is a check for the f	ollowing amount made	payable to the Flo	rida Depa	rtment of State:	
S35 Filing Fee E	IS43.75 Filing Fee & Certificate of Status	□S43.75 Filing Certified Cop (Additional co- enclosed)	у	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
P.O. Box 6	nt Section f Corporations		Amenda Division Clifton	Address ment Section n of Corporations Building xecutive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Diabetes and Wound Care Network,Inc

	Diabetes and Wound Care N	etwork,inc	
(Name o	of Corporation as currently	filed with the Florida Dept. of State)	
	P16000044513		
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the following	ig amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
	Wound Care Netwo	rk,Inc	The new
	ation "Corp." "Inc." or "C	" "company," or "incorporated" or the a o". A professional corporation name must	bbreviation
		N/A	
B. Enter new principal office address, (Principal office address MUST BE A S.)			
. 55	*		<del>;</del> _
			TIE TOP
			1 ::::
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of		N/A	[
(Marie 1982)	<u> </u>	-	
			- (-)
			 حم
<b>1</b> 5. <b>1</b> 6. <b>1</b> 1.			
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the	
	N/A		
Name of New Registered Agent		<del>-</del>	
			_
	(Florida stree	a address)	
New Registered Office Address:	N/A	, Florida	
	10	Tity) (Zip	Coder
N 10 14 14 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16			
New Registered Agent's Signature, if cl I hereby accept the appointment as registe		th and accept the obligations of the position.	
		at the action of the position.	
	<b>"</b> /A		
	/A		_
	Signature of New Reg	gistered 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 Doc	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		<del>-</del>	
Add Remove	N/A		
Remove	16		
Add	<del></del>	-	······································
Remove			
3 ) Change Add	_		
Remove			
4) Change	<del></del>		
Add Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change	<del></del>		
Add			<del></del>
Remove			

	(Be specific)	
	N/A	
	<del></del>	
		<del>.</del>
· · · · · · · · · · · · · · · · · · ·		<u> </u>
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares.	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:	
provisions for implementing the ame	ndment if not contained in the amendment itself:	
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:  N/A	
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The date of each amendment(s) a date this document was signed.	N/A loption:	, if other than the
date this document was signed.	N/A	
Effective date <u>if applicable</u> :	(no more than 90 days after amendme	nt file date)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	y
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast fficient for approval.	for the amendment(s)
	roved by the shareholders through voting groups. To each voting group entitled to vote separately on the	
	for the amendment(s) was/were sufficient for approv	al
by	(voting group)	<u>_</u> ."
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder as	ction and shareholder
■ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action	and shareholder
Dated	4/24/2018	
Signature	97	
(By a d	rector, president or other officer – if directors or off I. by an incorporator – if in the hands of a receiver, t ed fiduciary by that fiduciary)	
	Andres Cazau	
	(Typed or printed name of person signing	<u></u>
	Vice-President	
	(Title of person signing)	