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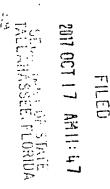
(Requestor's Name)
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	ATION: Venous Solutions	of Florida, Inc.	
DOCUMENT NUMBE			
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	atter to the following:	
j	ennifer A. Gardner		
		Name of Contact Perso	on
V	enous Solutions of Florida	, Inc.	
		Firm/ Company	
5	06 E. Tipton Road	, mis company	
_		Address	
P	lant City, FL 33567		
-		City/ State and Zip Cod	le
	1.0		
angie@	venoussolutions.com	16 6	
	E-mail address: (to be u	sed for future annual report	notification)
For further information o	concerning this matter, plea	se call:	
Jennifer A. Gardner		407 at (256-6617
Name of	Contact Person	at (407) 256-6617 Area Code & Daytime Telephone Number	
Enclosed is a check for t	he following amount made	payable to the Florida Dep	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		Ameno Divisio Cliftor	Address Iment Section on of Corporations on Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Venous Solutions of Florida, Inc.			2017 OCT 17 AMII: 4
	of Corporation as current	ly filed with the Florida Dept. of Stat	
P16000056504			TALL AHASSEE, FLORID
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new r	name of the corporation:		
Venous Solutions, Inc.			The now
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the desig word "chartered," "professional associ	nation "Corp," "Inc," or	'Co". A professional corporation nan	The new or the abbreviation ne must contain the
B. Enter new principal office address	if applicable:	NOT APPLICABLE	
(Principal office address MUST BE A	STREET ADDRESS)		
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		NOT APPLICABLE	
			
			
). If amending the registered agent a			
new registered agent and/or the ne	w registered office address	<u>i</u>	
Name of New Registered Agent	NOT APPLICABLE		
-			
	(Florida str	reet address)	
New Paristand Office Address	NOT APPLICABLE	Pl +1	
New Registered Office Address:		, Florida_ (City)	(Zip Code)
ew Registered Agent's Signature, if c			
hereby accept the appointment as regis	tered agent. I am familiar v	vith and accept the obligations of the p	osition.
	Signature of New R	legistered Agent, if changing	
		a	

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	V	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
i) Change		NOT APPLICABLE	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			***************************************
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			- Lague
Panova			

(Attach additional sheets, if necessary).	ilcles, enter change(s) here: (Be specific)
NOT APPLICABLE	(==
10 1 ST 500 THE TOTAL TO	
	1 10 11 11 11 11
F. If 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 in the amendment itself:
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 (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 (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 (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	name, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	namee, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
F. If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) NOT APPLICABLE	nament if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	nament if not contained in the amendment itself:

The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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)
(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.
September 28, 2017
Dated
(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)
Jennifer A. Gardner
(Typed or printed name of person signing)
President
(Title of person signing)