

Florida Department of State
Division of Corporations
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Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
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Amend

FEB 26 2018

I ALBRITTON

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

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**COR AMND/RESTATE/CORRECT OR O/D RESIGN
MEDICLEAR MEDICAL & RESEARCH CENTER, INC**

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LAZARUS CORPORATE
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February 23, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MEDICLEAR MEDICAL & RESEARCH CENTER, INC.
13215 SW 87 TERR
MIAMI, FL 33183

SUBJECT: MEDICLEAR MEDICAL & RESEARCH CENTER, INC.
REF: P17000047664

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.

The current name of the entity is as referenced above. Please correct your document accordingly.

The (INC) is cut off in the space provided for the name of the corporation.

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

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Irene Albritton
Regulatory Specialist II

FAX Aud. #: H18000060774
Letter Number: 418A00003774

P.O BOX 6327 - Tallahassee, Florida 32314

RECEIVED
18 FEB 23 PM 3:03
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Mediclear Medical & Research center,
INC.

Florida Document Number: P17 000047604

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: Mayrisleidy Orama

ADD: Yudit Cabanes Hernandez (P) & (RA)
2500 SW 107 Ave

Suite: 46-47

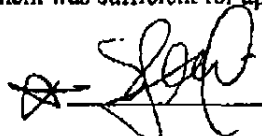
Miami FL 33165.

change All addresses to:

2500 SW 107 Ave Suite 46-4
Miami FL 33165

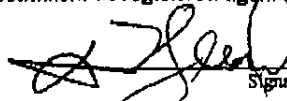
These articles of amendment were adopted on 2/22/18

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.


Signature
Yudit Cabanes (P)
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 of New Registered Agent, if changing

FILED
2018 FEB 23 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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