P170000 74940

- (Reques	tor's Name)	
(Address	s)	
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COVER LETTER

TO: Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPO	DRATION: DURAMED CORE	•		
DOCUMENT NUM	P17000074940			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this mat	tter to the following:		
	DON MOCK			
	DURAMED CORP	Name of Contact Person	n	
	111 N 2ND STREET STE 10	Firm/ Company		
		Address		
	FORT PIERCE, FL 34950	City/ State and Zip Cod	e	
DO	N@QPIHEALTHCARESERVI			
	E-mail address: (to be us	sed for future annual report	notification)	-1. ÷
For further informati	on concerning this matter, pleas	se call:		10 JAN 20
DON MOCK		772 at (332-2349	
Name	e of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check:	for the following amount made	payable to the Florida Depa	artment of State:	17 6 18 18 18 18 18 18 18 18 18 18 18 18 18
S35 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)	**************************************
	ailing Address nendment Section		Address Iment Section	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment to Articles of Incorporation of

DURAMED CORP

(Name of Corporation as current)	y filed with the Florida Dept. of State)
P17000074940	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or " word "chartered," "professional association," or the abbreviation	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the
new registered agent and/or the new registered office address	ng となっ
Name of New Registered Agent DON MOCK	<u> </u>
	= 35.
(Florida su	reet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent	:
Thereby accept the appointment as registered agent. Tum familiar	with and accept the obligations of the position.
Signature of New I	Registered 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> <u>Jo</u>	h <u>n Doe</u>	
X Remove	<u>V</u> <u>M</u>	ike Jones	
<u>X</u> Add	<u>SV</u> <u>Sa</u>	Ily Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	DON MOCK	111 N 2ND STREET
X Add			STE 101
Remove			FORT PIERCE, FL 34950
2) Change	P	PAM SEYMOUR	111 N 2ND STREET
Add			STE 101
X Remove			FORT PIERCE, FL 34950
3) Change	<u> </u>		
Add			
Remove			-
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		<u> </u>	
Add			
Remove			

Tamending or a	dding additional Artic	1es, enter change(s) here:		
Attach <i>additiona</i>	sheets, if necessary).	(Be specific)			
				_	
			<u> </u>		-
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			· · · · · · · · · · · · · · · · · · ·		
				••	<u> </u>
e	provides for an excha		:		
provisions for i	nplementing the amen	dment if not cont	ained in the amer	on or issued shares. idment itself:	
(if not appl	cable, indicate N/A)				
					
					<u> </u>
		<u> </u>			
					
					

	01/23/2019	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.	22/2010	
U17 Effective date <u>if applicable</u> :	23/2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statemen reach voting group entitled to vote separately on the amendment(s):	t
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and shareholder	
01/23/201 Dated	2 /	
select	Africtor, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	<u></u>
чрро.	DON MOCK	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	