

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	(#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	
(Do	cument Number)	
Certified Copies	Certificates of	of Status
<u> </u>		
Special Instructions to	Filing Officer:	





400322245664

12/26/18--01035--003 *+43.75

NC

R WOTE

SECRETARIASSEE, FL

FILED
18 DEC 26 PM 1: 48

COVER LETTER

TO: Amendment Section

Division of Cor	porations		
NAME OF CORPO	ORATION: Med Dyne Inc.		
	1BER: P18000091817		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	Shannon Stahlin		
		Name of Contact Persor	1
	Direct Incorporation		
		Firm/ Company	
	315 W Huron St Ste 240		
		Address	
	Ann Arbor, MI 48103		
		City/ State and Zip Code	2
doc	uments@directincorp.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	ion concerning this matter, pleas	se call:	
Shannon Stahlin		at (281-6496
Name of Contact Person		Area Co) de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	urtment of State:
□ \$35 Filling 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		Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
	O. Box 6327		Building
Tallahassee, FL 32314		2001 €	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Med Dyne Inc.

2018 DEC 26 PM 1: 48

(N) (C)	Charles The Charles The Charles The Charles
	ration as currently filed with the Florida Dept. of State)
P18000091817	TALLAMAGSELFL
(Do	cument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the	e corporation;
Med Dyne Recruiting Inc.	The new
	word "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)
D. If amending the registered agent and/or reginew registered agent and/or the new register	stered office address in Florida, enter the name of the red office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: 11. I am familiar with and accept the obligations of the position.
	Signature of New 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.

<u>PT</u>	John Doe	
<u>V</u>	Mike Jones	
<u>sv</u>	Sally Smith	
<u>Title</u>	<u>Name</u>	<u>Addres</u> s
		· · · · · · · · · · · · · · · · · · ·
	_	
		-
		·
	<u>PT</u> <u>V</u> <u>SV</u>	V Mike Jones SV Sally Smith

	s, y necessary).	(Be specific)			
					
	.				
					
					
				· · · · · · · · · · · · · · · · · · ·	
	-				
			, <u> </u>		
_					
			······································		·
	ides for an excl	nange, reclassifica	tion, or cancellation	n of issued shares.	
f an amendment prov		ndmant if nat ann	tained in the amen	Iment itself:	
f an amendment prov provisions for impler	nenting the ame	<u>mament it not con</u>	tamen in the amend	31116 11 4 34,54 11 4	
provisions for impler	nenting the ame	ndment it not con	tamen in the amend	<u> </u>	
f an amendment prov provisions for impler (if not applicable,	nenting the ame	noment it not con	taneo in the ameny	<u> </u>	
provisions for impler	nenting the ame	endinent it not con	taneo in the ameny		
provisions for impler	nenting the ame	nument it not con	tamen in the ameny		
provisions for impler	nenting the ame	nument it not con	tameo iii dik ameni		
provisions for impler	nenting the ame	nament it not con	Tameo iii tik ameni		
provisions for impler	nenting the ame	noment it not con	tamed in the amend		
provisions for impler	nenting the ame	noment it not con	tamed in the amend		
provisions for impler	nenting the ame	noment it not con	tamed in the amend		
provisions for impler	nenting the ame	noment it not con	tamed in the amend		
provisions for impler	nenting the ame	noment it not con	tamed in the amend		
provisions for impler	nenting the ame	noment it not con	tamed in the amend		
provisions for impler	nenting the ame	noment it not con	tamed in the ameny		
provisions for impler	nenting the ame	noment it not con	tamed in the amend		

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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	lment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendments:	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder was not required.	reholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	der
Signature (By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or oth	
appointed fiduciary by that fiduciary)	
Susan Brooks-Grallnick	
(Typed or printed name of person signing)	
Incorporator	
(Title of person signing)	