

**Florida Department of State**  
**Division of Corporations**  
**Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H20000378030 3)))



H200003780303ABCX

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
Phone : (305)552-5973  
Fax Number : (305)675-5944

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

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN**  
**MEDI SUPPLY CORP**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment  
to  
Articles of Incorporation  
of

MEDI SUPPLY CORP

Florida Document Number: P20000050400

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

change all addresses:

4700 N Hiatus Rd.

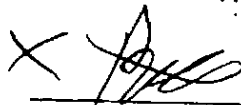
Suite 350.

Sunrise FL 33351.

FILED  
2010 OCT 30 PM 3:48  
CLERK OF THE CIRCUIT COURT  
IN AND FOR THE COUNTY OF  
DADE, FLORIDA

These articles of amendment were adopted on 10-30-20

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.

X 

Signature

(P) RUBEN MADERO CARRILLO

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