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.

(((H21000379476 3)))



H210003794763ABC6

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.

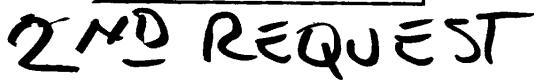
Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

\*\*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 BENEFICIAL MEDICAL SUPPLY INC

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



Electronic Filing Menu

Corporate Filing Menu

He.p

JH

ALDOT 13 AM 7: 53

## Articles of Amendment

## Articles of Incorporation of

BENEFICIAL MEDICAL SUPPLY INC
Florida Document Number: P2100047205
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 - LIVAN RUIZ VALLES  AGREGAR - DULCE FUENTES LOPEZ  P- RA
Agregar - DULCE FUENTES LOPEZ
P-RA
9010 GW 13+AV. Suit. 224 MIAMI, F1, 33186.
MIAMI, F1, 33186.
These articles of amendment were adopted on 16/11/2
The corporation has only one group of voting stock. This amendment was approved by the shaleholders and the number of votes cast for amendment was sufficient for approval.
Signature 3
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.
107/0) -