

P95000004477

12/17/96

Rina

MICHAEL LEVINE

Requestor's Name

633 NE 167 St #501

Address

NMB FL 33162

City

State

ZIP

Phone

653-38000

VALIDATION ONLY

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*****35.00 *****35.00

CORPORATION(S) NAME

Diabetic Medical Services, Inc.

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DIVISION OF CORPORATIONS

97 JUN - 8 PM 4:22
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- () Profit
() NonProfit
() Foreign
() Limited Partnership
() Reinstatement
() Certified Copy
() Call When Ready
X Walk In
- (X) Amendment
() Dissolution
() Annual Report
() Reservation
() Photo Copies
() Call If Problem
() Will Wait
- () Merger
() Mark
() Other
() Change of Registered Agent
() Certificate Under Seal
() After 4:30
X Pick Up
() Mail Out

Empire Toll Free: 1-800-432-3028

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

Name Change
1-8-97
JL

Charter Number Only

1-3-97

Michael Levine

Requestor's Name

633 NE 167 St. #501

Address

N. Miami Bch. Fl. 33162

City

State

Zip

Phone

#653-3800

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CORPORATION(S) NAME

TRANS AMERICA Medical Management Corporation

Diabetic medical Services, Inc.



Empire Toll Free: 1-800-432-3028

☐ Profit

☐ NonProfit

☒ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

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Acknowledgment

W P Verifier



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 18, 1996

EMPIRE

MIAMI, FL

SUBJECT: TRANSAMERICA MEDICAL MANAGEMENT CORPORATION
Ref. Number: P95000004477

We have received your document for TRANSAMERICA MEDICAL MANAGEMENT CORPORATION and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

The amendment must be signed by an incorporator if adopted by the incorporators or by a director if adopted by the directors.

The name and capacity of the person signing the document must be noted beneath or opposite the signature.

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

If you have any questions concerning the filing of your document, please call (904) 487-6906.

Darlene Connell
Corporate Specialist

Letter Number: 696A00056386

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97 JAN -8 AM 10:33
DIVISION OF CORPORATION

**ARTICLES OF AMENDMENT TO
ARTICLES OF INCORPORATION
OF**

TransAmerica Medical Management Corporation

P 95000004477

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: *(indicate article number (s) being amended, added or deleted)*

ARTICLE I amended:

Delete from Article I, "The name of the Corporation shall be: "TransAmerica Medical Management ^{Corporation}" and amend the Article I as follows: "The name of the Corporation shall be: "Diabetic Medical Services, Inc."

FILED
97 JAN - 8 PM 4: 22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself are as follows:

THIRD: The date of each amendment's adoption: December 3rd, 1996

FOURTH: Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups.
The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"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 action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this day 3rd of December 1996

Signature

Sandra Trust Pres
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)

OR

(By a Director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

SANDRA TRUST
NAME

DIRECTOR / PRESIDENT
TITLE