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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	P95000005479	upply, Inc	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
•	Tony Egizi		
-	CRAE Investment Managem	Name of Contact Person ent Group, LLC	
-	2281 Griffin Road	Firm/ Company	
-	Fort Lauderdale FL 33312	Address	
-		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·
tony.e.	gizi@craelle.com  E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Tony Egizi		954 at (	417-3522
Name of Contact Person Area Code & Daytime Telephon		le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amei	ing Address ndment Section ion of Corporations	Amend	Address ment Section n of Corporations

P.O. Box 6327 Tallahassee, Fl. 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Express Medical Supply, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P95000005479 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Jorge Hernandez Name of New Registered Agent 1978 NW 135th Ave (Florida street address) Miami , Florida New Registered Office Address: (City) 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.

Page 1 of 4

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	Manuel E. Aguero	1978 NW 135th Ave
			Miami FL 33182
X Remove			
	D	Carlos J. Rodriguez	1978 NW 135th Ave
2) Change			Miami FL 33182
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add	·		
Remove			
Kemove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti- Attach additional sheets, if necessary).	
<del></del>	
	<del> </del>
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
,	

## May 1, 2019

The date of each amendment(s) adoption:	, if other than the
date this document was signed.  January 1, 2019	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this da document's effective date on the Department of State's records.	te will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s by the shareholders was/were sufficient for approval.	;)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statements the separately provided for each voting group entitled to vote separately on the amendment(s):	nt
"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.	r
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
May 1, 2019	
Dated	
Signature While	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed tidyciary by that fiduciary)	ι
Manuaci E. Aguero	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	<del></del>
/ p. Varani 2. 2 2.	