# P95000017609

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LOCAL REPRESENTATIVE TALLAH	ASSEE	OFFICE USE ONLY			
CORPORATION NAME(s) & I	OCUMENT NUM	BER(S) (if known):	1-		
MEGA MEDIC	AL EQUI	PMENT A	ENTAL.	, INC	
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#### FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

March 25, 1998

**LAZARUS** 

MIAMI, FL

SUBJECT: MEGA MEDICAL EQUIPMENT RENTALS, INC.

Ref. Number: P95000017609

We have received your document for MEGA MEDICAL EQUIPMENT RENTALS, INC. 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 document must have original signatures.

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

The document must be executed by a director if it was adopted by the directors without shareholder action.

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 (850) 487-6957.

Joy Moon-French Corporate Specialist

Letter Number: 098A00015991

#### ARTICLES OF AMENDMENT

## TO ARTICLES OF INCORPORATION

FILED

98 MAR 26 PM 4: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OF

	MDG2 MDDIGAL BOULDMENT DENMALS THO
	MEGA MEDICAL EQUIPMENT RENTALS, INC.  (present name)
	A Control of the Cont
ursuant to if followin	the provisions of section 607.1006, Florida Statutes, this corporation adopts g articles of amendment to its articles of incorporation:
TRST: r deleted)	Amendment(s) adopted: (indicate article number(s) being amended, added
	- SEE ATTACHMENT
•	
	•
ECOND:	
ECOND;	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:
	•
HIRĎ:	Particular of the contraction for many hours comment and another than the contraction of
IHKD;	The date of each amendment's adoption: 03 - 23 - 1998
OURTH:	Adoption of Amendment(s) (check one)
The an action	dendment(s) was/wefe adopted by the incorporators without shareholder and shareholder action was not required.
The air shareh	mendment(s) was/were adopted by the board of directors without colder action and shareholder action was not required.
The an	nendment(s) was/were approved by the shareholders. The number of cast for the amendment(s) was/were sufficient for approval.
_ The am	nendment(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)

(continued)

ARTICLES OF AMENDMENT OF ARTICLES OF INCORPORATION FOR:

#### MEGA MEDICAL EQUIPMENT RENTALS, INC.

ADMENTDMENT (S) ADOPTED:

#### ARTICLE V: DIRECTORS

THE NAME AND THE STREET OF THE NEW DIRECTOR OF THIS CORPORATION HAS TO BE AMENMENT AS FOLLOW:

A.- DELETE OLD PRESIDENT:

ELDA ALFONSO 11401 SW 40 ST. SUITE #330. MIAMI, FL. 33165

B.- ADD NEW PRESIDENT:

JAMES A THOMPSON 11401 SW 40 ST. SUITE #330. MIAMI, FL. 33165

C.- ADD NEW VICEPRESIDENT:

ELDA ALFONSO 11401 SW 40 ST. SUITE #330. MIAMI, FL. 33165 ARTICLES OF AMENDMENT OF ARTICLES OF INCORPORATION FOR:

### MEGA MEDICAL EQUIPMENT RENTALS, INC.

ADMENTDMENT (S) ADOPTED:

#### ARTICLE IV: REGISTERED AGENT

THE NAME AND THE STREET OF THE NEW REGISTERED AGENT OF THIS CORPORATION HAS TO BE AMENMENT AS FOLLOW:

A.- DELETE OLD REGISTERED AGENT:

ELDA ALFONSO
11401 SW 40 ST. SUITE #330. MIAMI, FL. 33165

B. - ADD NEW REGISTERED AGENT:

JAMES A THOMPSON 11401 SW 40 ST. SUITE #330. MIAMI, FL. 33165

Signed this Harch day of 23, 1998.
By (A director) or incorporator if adopted by the directors or incorporators)
Elda Z. alfonso (Typed or printed name)
PresidenT (Title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICES OF PROCESS FOR THE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AN ACCEPT THE OBLIGATIONS MY POSITION AS A REGISTERED AGENT.

DATE MAN 23, 1998