## P9500036338

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NEW FILINGS	AMENDM	IENTS	
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## FLORIDA DEPARTMENT OF STATE

Katherine Harris Secretary of State

February 24, 1999

**LAZARUS** 

MIAMI, FL

SUBJECT: BEST MEDICAL SERVICES, INC.

Ref. Number: P95000036338

We have received your document for BEST MEDICAL SERVICES, 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The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 1998 annual report. The entity must be reinstated before this document can be filed.

Please complete the enclosed form and return it to us with a check for \$900.00 in order to complete your reinstatement.

The registered agent change must be a part of the amendment.

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) 487-6908.

Teresa Brown Corporate Specialist

Letter Number: 499A00008543

## Articles of Amendment to Best Medical Services, Inc.

Pursuant to Section 607.1106(1), Florida Status, the undersigned corporation adopts the following articles of amendment to its articles of incorporation.

FIRST:

The name of the corporation is:

Best Medical Services, Inc.

SECOND:

AMENDMENT ADOPTED

Changed to Article - Officers and Directors of the Corporation

The following person was elected to hold the following position:

Servando Acosta President/ Secretary/Treasurer/Register Agent 7811 S. W. 24 St # 132 Miami, Fl 33155

THIRD:

Date of Adoption

The amendment was adopted February 12th 1999

FOURTH:

ADOPTION OF AMENDMENT

The amendment was approved by shareholders. The number of votes cast for the amendment was sufficient for approval.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Amendment this 12th day of February, 1999

Servando Acosta

Best Medical Services, Inc.

CERTIFICATION OF DESIGNATED REGISTERED AGENT/REGISTERED OFFICE

Having been named as registered agent and to accept service of process for Best Medical Services, Inc. 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 and accept the obligations of my postion as registered agent.

Servando Acosta 7811 S. W. 24 St # 132 Miami, FL 33155