

96000021391

(Requestor's Name)

LIPTON INSURANCE EXAMS
221-3 DELTA CT
TALLAHASSEE, FL 32303
(850) 422-2828
FAX 422-2858

(City/State/Zip/Phone #)

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

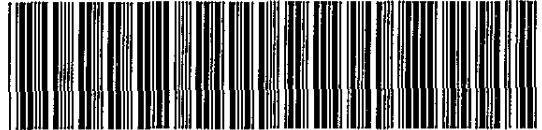
(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2004 MAR 19 PM 12:16

Name change
LFS
3-25-04

TRANSMITTAL LETTER

: Amendment Section
Division of Corporations

SUBJECT: Change name of corporation

DOCUMENT NUMBER: _____

enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bess Kling
(Name of Person)

Lipton Insurance Exams, Inc.
(Name of Firm/ Company)

221 Delta Ct Ste 3
(Address)

Tallahassee FL 32303
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Bess Kling at (850) 422-2828
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$5 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☒ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2004 MAR 19 PM 12:16

Articles of Amendment
to
Articles of Incorporation
of

LIPTON INSURANCE EXAMS, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

(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:

NEW CORPORATE NAME (if changing):

Data Med, INC.

must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)
 or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

(Attach additional pages if necessary)

If amendment provides for exchange, reclassification, or cancellation of issued shares, provisions
 implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

date of each amendment(s) adoption: 3/17/04

effective date if applicable: 3/17/04
(no more than 90 days after amendment file date)

Option of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were approved 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 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.

dated this 17 day of March 2004

Signature Bess Kling, president
(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 court appointed fiduciary by that fiduciary)

Bess Kling
(Typed or printed name of person signing)

president
(Title of person signing)

FILING FEE: \$35