

P96000028630

LAZARUS CORPORATE INDUSTRIES, INC.

Requestor's Name

890 S.W. 87 AVENUE, SUITE: 16

Address

MIAMI, FLORIDA 33174 (305) 552-5973

City/State/Zip

Phone #

LOCAL REPRESENTATIVE TALLAHASSEE

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. MASTER MEDICAL & ASSOCIATES CORP.
(Corporation Name) (Document #)

2. _____ (Corporation Name) (Document #) 400002210344--0
-06/12/97--01071--030

3. _____ (Corporation Name) (Document #) *****35.00 *****35.00

4. _____ (Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of State

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 JUN 12 PM 12:26

FILED

6/12

John Arnold

97 JUN 12 AM 11:08
RECEIVED

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

MASTER MEDICAL & ASSOCIATES CORP.

(present name)

FILED

97 JUN 12 PM 12:26

SECRETARY OF STATE
TALLAHASSEE FLORIDA

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)

SEE ATTACHEMENTS.

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: 06/06/1997

FOURTH: Adoption of Amendment(s) (check one)

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

☐ 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 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)

(continued)

ARTICLE OF AMENDMENT TO ARTICLES OF INCORPORATION
FOR:

ADMENDMENT (S) ADOPTED:

ARTICLE IV: REGISTERED AGENT

THE NAME AND THE ADRESSES OF THE NEW REGISTERED AGENT
HAS TO BE AMENMENT AS FOLLOW:

A) DELETE OLD REGISTERED AGENT:

LUIS ORLANDO SUAREZ
9520 SW 40 ST SUITE #210
MIAMI, FL. 33165.

B) ADD NEW REGISTERED AGENT:

JULIO PULIDO PUNALES
7811 CORAL WAY, SUITE # 120
MIAMI, FL. 33155

ARTICLE V: DIRECTORS

THE NAME AND ADDRESS OF THE NEW PRESIDENT SHALL BE:

JULIO PULIDO PUNALES
7811 coral way , suite # 120
MIAMI, FL. 33155

Signed this 06 day of June, JUNE, 19, 97.

By LUIS ORLANDO SUAREZ. *Luis O Suarez*
(Chairman or Vice Chairman of the Board of Directors, President or
other officer if adopted by the shareholders)
OR
(A director or incorporator if adopted by the directors or incorporators)

LUIS ORLANDO SUAREZ
(Typed or printed name)

PRESIDENT. - DIRECTOR
(Title)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE 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 AND ACCEPT THE OBLIGATIONS MY POSITION AS REGISTERED AGENT.

SIGNATURE *Luis O Suarez*

DATE 06/06/1997