

P96000045421

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LOCAL REPRESENTATIVE TALLAHASSEE

200002878632-3

-05/18/99--01030--019

*****35.00 *****35.00

OFFICE USE ONLY

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

1. ABDON MEDICAL SUPPLIES INC.
(Corporation Name) (Document #)

2. Amend
(Corporation Name) (Document #)

3.
(Corporation Name) (Document #)

4.
(Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2:00

☐ Certified Copy

☐ Mail out ☐ Will wait

☐ Photocopy

☐ Certificate of Status

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

TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
RECEIVED
99 MAY 18 AM 11:27

Examiner's Initials

5/19/99



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

May 18, 1999

Lazarus Corporate Filing Service, Inc.
3320 S.W. 87th Avenue
Miami, FL

SUBJECT: ABDON MEDICAL SUPPLIES, CORP.
Ref. Number: P96000045421

We have received your document for ABDON MEDICAL SUPPLIES, CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

Please check one of the boxes in the fourth paragraph.

If you have any questions concerning the filing of your document, please call (850) 487-6907.

Annette Ramsey
Corporate Specialist

Letter Number: 799A00027530

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MAY 19 11:37
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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

FILED
99 MAY 19 PM 3:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ABDON MEDICAL SUPPLIES, CORP.
(PRESENT NAME)

PURSUANT TO THE PROVISIONS OF SECTION 607,1006, FLORIDA STATUTES, THIS CORPORATION ADOPTSS FTHE FOLLOWING ARITCLES OF AMENDMENT TO ITS ARTICL OF OF INCORPORATION:

FIRST: AMENDMENT(S) ADOPTED: (INDICATE ARICLE NUMBER(S) BEING AMENDED ADDED OR DELETED)

ARTICLE I NAME

WAS : GUILLERMO ESTRADA PRESIDENT

 NOW: LIGIA NOVAS PRESIDENT

SECOND: IF AN AMENDMENT PROVIDES FOR AN EXCHANGE, RECLASSIFICAATION 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: 09/03/98

FOURTH: ADOPTION OF AMENDMENT(S) (CHECK ONE)

- ☒ 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)

- * 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.

SIGNED THIS 14 DAY OF MAY, 1999.

SIGNATURE Ligia Novas
(By the Chairman or Vice Chairman of the Board
of Directors, President or other officer if adopted
by the shareholder(s))

OR
(By a director if adopted by the directors)

OR
(By an incorporator if adopted by the incorporators)

LIGIA NOVAS
Typed or printed name

PRESIDENT
Title