P96QQQQQ58818 Medical Weight

Albert Menduni, M.D. Internal Medicine

Rick Darraron, M.D. Internal Medicine

Lynda A. Brogdon, Ph.D. Psychologist FL LIC. PY 0004363 100002082871--0 -02/11/97--01006--005 *****35.00 ******35.00

February 7, 1997

Secretary of State
Division of Corporations
Attn: Amendment Section
P. O. Box 6327
Tallahassee, FI 32314

To Whom it May Concern:

Attached, please find our Articles of Amendment to our Articles of Incorporation, for Nu-Way Medical Weight Management, P.A. We have also enclosed a check for the quoted amount. Upon filing our documents, please return confirmation to:

Nu-Way Medical Weight Management, P.A.

2300 Killearn Center Boulevard

Tallahassee, FI 32308

(904) 894-9797

Sincerely.

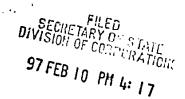
Benjamin C. Brogdon

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ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF



Nu-WAY U.S. A., P.A.
(DIESCRIT name)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit 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)

ARTICLE. I (AMENDED) NAME AND PRINCIPLE OFFICE

THE NAME OF THIS CORPORATION SHALL BE CHANGED TO NU-WAY MEDICAL WEIGHT MANAGEMENT, P.A.
THE PRINCIPLE PLACE OF BUSINESS AND MAILING ADDRESS OF THIS CORPORATION IS 2300 KILLEARN CENTER BOULEVARD, TALLAHASSEE, FLORIDA 32308.

ARTICLE VII (AMENDED)

ADDRESS OF REGISTERED OFFICE AND REGISTERED AGENT
THE STREET ADDRESS OF THE REGISTERED OFFICE OF
THE CORPORATION IN THE STATE OF FLORIDA SHALL
BE CHANGED TO 2300 KILLEARN CENTER BOULEVARD,
TALLA HASSEE, FLORIDA 3Z308. THE NAME OF THE
REGISTERED AGENT OF THE CORPORATION AT THE ABOUE
ADDRESS SHALL BE CHANGED TO BENJAMIN C. BROGDON.
THE BOARD OF DIRECTORS MAY FROM TIME TO TIME CHANGE
THE REGISTERED OFFICE TO VANY OTHER ADDRESS IN THE
STATE OF FLORIDA OR CHANGE THE REGISTERED AGENT.

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: JANUARY 27, 1997	
FOURTH: Adoption of Amendment(s) (CHECK ONE)		
C	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.	
C	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	
2	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
	•	
Signed this <u>27</u> day of <u>Jan</u> , 19 <u>97</u>		
Signature	Denn-C Brown Printe	
(By the Chairman or Vice Chairman of the Board of Directors, President or other officer if adopted by the shareholders)		
	OR	
(By a director if adopted by the directors)		
	OR	
	(By an incorporator if adopted by the incorporators)	
BENJAMINI C. BROGDON Typed or printed name		
	PRESIDENT Director	

Florida Department of State, Sandra B. Mortham, Secretary of State

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of FLORUSA
submits the following statement in order to change its registered office or registered agent, or both, in the
1. The name of the corporation is: AU-WAY U.S. A., P.A.
2. The mailing address of the corporation is: 2300 KILLEBRAL CENTER BOULEVART IACLAHASSEE, FL 3230B
3. Date of incorporation/qualification: JANUARY 19, 1996 Document number: P9600005818 4. The name and address of the current registered agent and office:
ROBERT A. PIERCE
227 SOUTH CALHOUN STREET
TALLAHASSEE, FL 32301
5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)
BENJAMIN C. BROGDON
2300 KILLEARN CENTER BOULEVARD
TAMAHASSE, FL 32308
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board. (Signature of an officer, chairman or vice chairman of the board) (Date)
Benjamin C - Brogdon (Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent.
Our (Signature of Registered Agent) 1/27/97 (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

FILING FEE: \$35.00

CR2E045(1/95)