

P98000073530

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FILED
2001 JUN -6 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

1. DIVERSE HEALTHCARE INC.

(Corporation Name)

(Document #)

2. _____
(Corporation Name)

(Document #)

3. _____
(Corporation Name)

(Document #)

4. _____
(Corporation Name)

(Document #)



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TO ALL REGISTRATION
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2001 JUN -6 PM 10:25

DEPT. OF STATE
REGISTRATION

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 checked="" 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

Q. COULLETTE JUN 06 2001

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-06/06/01--Q1050--008

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Examiner's Initials

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF

FILED
2001 JUN -6 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DIVERSE HEALTHCARE INC.

(P98000073530)

(present 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)

- DELETE (ARTICLE # 5) last paragraph "THE NUMBER OF SUCH SHARES IS 300 AND ARE WITHOUT PAR VALUE"
- Adopt (ARTICLE # 5) last paragraph to: "THE NUMBER OF SUCH SHARES IS 300 (\$1.00) PAR VALUE". THE SHARES WILL BE DISTRIBUTED AS FOLLOWS: LUIS A. GONZALEZ 100 SHARES, RAMON E. PEREZ 100 SHARES & JOHN G. PADRON 100 SHARES.
- DELETE (ARTICLE # 3): ROBERT N. PELIER, ESQ as Register Agent
- Adopt (ARTICLE # 3): JOHN G. PADRON as Register 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:

N/A

THIRD: The date of each amendment's adoption: JUNE 1st, 2001

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 01 day of JUNE, 2001

Signature

X John G. Padron (DIRECTOR)

(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)

JOHN G. PADRON

Typed or printed name

DIRECTOR

Title

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of Florida, submits the following statements in designating the registered office/registered agent, in the State of Florida.

1- The name of the corporation is: DIVERSE HEALTHCARE INC.

2- The name and address of the registered agent & office is

JOHN G. PADRON

8315 GRAND CANAL DR.

MIAMI, FL. 33144

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE 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 OF MY POSITION AS REGISTERED AGENT.

SIGNATURE X [Signature]

DATE JUNE 01-2, 001.