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00 APR 14 AM 11:21  
TALLAHASSEE, FLORIDA

**LAZARUS CORPORATE FILING SERVICE**

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**MIAMI, FLORIDA (305)552-5973**  
(City, State, Zip) (Phone #)

**TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)**

OFFICE USE ONLY

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

1. **GENESIS MEDICAL EQUIPMENT, INC.**  
(Corporation Name) (Document #)

2. \_\_\_\_\_  
(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

RECEIVED  
00 APR 14 AM 10:26  
STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

| 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/<br>QUALIFICATION |                     |
|--------------------------------|---------------------|
| <input type="checkbox"/>       | Foreign             |
| <input type="checkbox"/>       | Limited Partnership |
| <input type="checkbox"/>       | Reinstatement       |
| <input type="checkbox"/>       | Trademark           |
| <input type="checkbox"/>       | Other               |

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-04/14/00--01028--023  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

Examiner's Initials

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

**FILED**  
**00 APR 14 AM 11:21**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

GENESIS MEDICAL EQUIPMENT, INC.

3383 NW 7 Street #307

Miami FL 33125

(present name)

*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)

**DELETE:**

Article IV      REGISTERED AGENT AND STREET ADDRESS

Gabriela Iqjani-Negron

671 NE 195 Street #314

Miami, FL 33179

**ARTICLE VI DIRECTORS**

Gabriela Iqjani-Negron

671 NE 195 Street #314

Miami, FL 33179

**ADD:**

Article IV      REGISTERED AGENT AND STREET ADDRESS

Roberto Iqjani

1730 SW 99 Ct

Miami, FL 33165

**ARTICLE VI DIRECTORS**

Roberto Iqjani

1730 SW 99 Ct

Miami, FL 33165

**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: 04/13/00

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 13 day of APRIL, 19 2000

Signature. x

*Gabriela L. Negron*  
(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)

GABRIELA L. NEGRON

Typed or printed name

PRESIDENT

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.

x

DATE