## V48471

Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

December 6, 2007

JOSE THOMAS CPA THOMAS & COMPANY C.P.A., P.A. 9710 STIRLING RD, SUITE #101 COOPER CITY, FL 33024

SUBJECT: TECHNOMEDICAL INSTRUMENTATION, INC.

Ref. Number: V48471

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

Amendments for Florida profit corporations are filed in compliance with section 607.1006, Florida Statutes. Please see the enclosed information.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.)

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Pamela Smith Regulatory Specialist II

Letter Number: 407A00068896

Pluse See the affected Document Promed RECEIVED.

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And accopted by the Registered Fallamassee. Florilly.

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

	NAME OF CORPORATION:	IECHNO	WEDICAL INSTRUME		
	DOCUMENT NUMBER:	V 48471			
	The enclosed Articles of Amendment and fee are submitted for filing.				
	Please return all correspondence concerning this matter to the following:				
	Name of Contact Person)				
	THOMAS & COMPANY C.P.A., P.A.				
	(Firm/ Company)				
	9710 57	TRLING R	DAD, SUITE # 101		
	9710 STIRLING ROAD, SUITE # 101 (Address)			<del> </del>	
	COOPER	CITY, F	FL 33024		
	COOPER CITY, FL 33024  (City/ State and Zip Code)			<del>-</del>	
	For further information concerni	ng this matter, p	lease call:		
	JOSE THOMAS C.  (Name of Contact Pers	<b>△ · Å</b> .	at ( <u>954</u> ) 435 7 (Area Code & Daytime Tel	≥12_ ephone Number)	
	Enclosed is a check for the following amount:				
\$ 35°	□ \$35 Filing Fee □ \$43.75 F	-	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	<del>2</del>	

F.IL. 200 SECRETARY OF STATE DIVISION OF CORPORATIONS

## Articles of Amendment to Articles of Incorporation of

2007 DEC 28 PM 4: 07

(Name of corporation as currently filed with the Florida Dept. of State)
V48471
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
ARTICLE TITLE REGISTERED AGENT NAME & ADDRESS - DELETE
DELETE: CARLOS RESTREPO, 12840 NW 18TH CT. PEMBROKE PINES, FL 33028
ARTICLE TITLE REGISTERED AGENT NAME & ADDRESS - ADD
ADD: JOSE THOMAS C.P.A. 9710 STIRLING ROAD, SUITE # 101  CORPER CITY EL 23014 I hereby am familiar with and frether
COOPER CITY FL 330245 accept the duties and frether area from the duties and exercise the contract of the cont
** ARTICLE TITLE AD - DELETE
DELETE: CARLOS RESTREPO, 12840 NW 18"H CT. PEMBROKE PINES, FL 33028
ARTICELE TITLE DO -ADD
ADD: JOHANNA MENDEZ, 12840 NW 18 TH CT. PEMBROKE PINES, FL 33018
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of adoption of the am	endment(s) was: 11 15 07
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) wa	as (were) adopted by the Shareholdow) directory,
,	
-	
Signature	a & wherioles P.
have not been selec	vice chairman of the board, president or other officer- if directors cted, by an incorporator- if in the hands of a receiver, trustee, or ed fiduciary, by that fiduciary.)
	ANNA MENDEZ
(Турс	ed or printed name of person signing)
PRF.	SIDENT
	(Title of person signing)

**FILING FEE: \$35**