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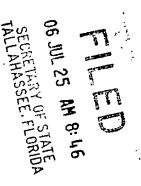


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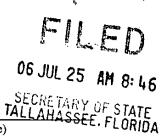


## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Aura Oliva	as, P.A.	<u></u>
DOCUMENT NUM	1BER: P05000040553	}	
The enclosed Article	es of Amendment and fee a	re submitted for filing.	
Please return all corr	respondence concerning thi	s matter to the following:	
		Olivas	
	(Name o	of Contact Person)	
	Au	ra Olivas, P.A.	
	(Fir	m/ Company)	
	4000 Ponce	De Leon Blvd. Suite 47	0
	-	(Address)	
	Coral Gable	s, Florida 33146	
	(City/ St	tate and Zip Code)	· ·
For further informat	ion concerning this matter,	please call:	
	Olivas	at ( <u>305</u> ) 443-66	
(Name o	of Contact Person)	(Area Code & Daytime	: Telephone Number)
Enclosed is a check	for the following amount:	<b>;</b> ′.	
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Add Amendment Division of O P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	ircle

## Articles of Amendment to Articles of Incorporation of



Aura Olivas, P.A.

(Name of corporation as currently filed with the Florida Dept. of State)

P05000040553
(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):
N/A
(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 II:
The principal Place of Business Address:
Change From: 2400 South Dixie Highway Suite 100 Miami, Florida 33133.
Change to: 4000 Ponce De Leon Blvd. Suite 470 Coral Gables, Florida 33146.
The mailing Address of the Corporation:
Change from: 2400 South Dixie Highway Suite 100 Miami, Florida 33133
Change to: 4000 Ponce De Leon Blvd. Suite 470 Coral Gables, Florida 33146
(Attach additional pages if necessary)
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)
N/A

(continued)

The date of each amendment(s) adoption: 7/18/06
Effective date if applicable: 7/18/06
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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.
Signature  (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  (Typed or printed name of person signing)
(Title of person signing)

FILING FEE: \$35