P0900001145

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		1

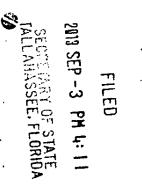
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR		DLUTIONS GRO	OUP INC
DOCUMENT NUME	BER: P0900002114	5	
	of Amendment and fee are sub		
Please return all corres	spondence concerning this mat	ter to the following:	
	JUAN CARLOS E	CHEVERRIA	
		Name of Contact Person	1
	ECHEVERRIA CA	ALVO & ASSOC	CIATES
		Firm/ Company	
	7900 SW 57 AVE	STE 12	
		Address	
	SOUTH MIAMI, F	L 33143	
		City/ State and Zip Code	2
JE(CHEVERRIA@EC	HEVERRIACAL	VO.COM
		ed for future annual report	
For further information	n concerning this matter, pleas	e call:	
JUAN CARL	OS ECHEVERRIA	1 at (786	, 718-1490
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	artment of State:
■ \$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)
<u>Mai</u>	ling Address	Street	Address
Amendment Section		Amendment Section	
	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		
Tall	Tallahassee, Fl. 32314 2661 Executive Center Circle		
. A . A.			assee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

DEBT RELIEF EXPERTS INC. 2013 SE

2013 SEP - 3 PM 4: 11

	filed with the Florida Dept. of State	SECRETARY OF STATE TALLAHASSEE, FLOR	TE IDA
P09000021145		MALL MINOSELI / LOS	
(Document Number	of Corporation (if known)	" <u>"</u>	•
Pursuant to the provisions of section 607.1006, Flor is Articles of Incorporation:	ida Statutes, this Florida Profit Corpo	ration adopts the following an	nendment(s)
A. If amending name, enter the new name of the	corporation:		
UNITED SOLUTIONS GROUP	INC	Th	e new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A professiona	"incorporated" or the abbre	viation
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	BOX)		
D. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered.		r the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·	, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		bligations of the position.	
<u></u>			
Signature of	New Registered Agent, if changing		

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be <math>PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Remove			(1818-18-8-11-11-1-1-1-1-1-1-1-1-1-1-1-1
6) Change			
Add		_	
Parrova			

amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
	·
	-
· ·····	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		<u> </u>
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
by	.,,	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated	8/29/13	
Signature		
	rector, president or other officer – if directors or officers have not been	
	d, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	WALTER S. VARGAS	
	(Typed or printed name of person signing)	
	PRESIDENT	

(Title of person signing)