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(Re	questor's Name)	
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CORPORATION NAME(S) & DOCUM	MENT NUMBER(S), (if known):
1. GS HEALT (Corporation Name)	H SERVICES CORP
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NEW FILINGS	<u>AMENDMENTS</u>
Profit	Amendment
Not for Profit Limited Liability	Resignation of R.A., Officer/Director Change of Registered Agent
Domestication	Dissolution/Withdrawal
Other	☐ Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
☐ Fictitious Name	Limited Partnership Reinstatement
	Trademark
	Other
CR2E031(7/97)	Examiner's Initials

Articles of Amendment to Articles of Incorporation of

FILED

, GS Healt	it Services Corp	ZUITHAR -4 PH 1:35
(Name of Corporation as curre	ntly filed with the Florid	a Dept. of State) SECRETARY OF STATE
	000001305	TALLAHASSEE, FLORIDA
(Document Num	ber of Corporation (if known	wn)
suant to the provisions of section 607.1006 endment(s) to its Articles of Incorporation:	5, Florida Statutes, this Fl	lorida Profit Corporation adopts the follow
<u>If amending name, enter the new name of</u>	the corporation:	
		m)
ne must be distinguishable and contain t	1 1 11 11 11 11	The new
ne must contain the word "chartered," "prof Enter new principal office address, if appl incipal office address <u>MUST BE A STREE</u>	licable:	the abbreviation "P.A."
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
(Maning address MATT BEATTOST OF THE	<u></u>	
	-	
If amending the registered agent and/or re	egistered office address in	n Florida, enter the name of the
new registered agent and/or the new regis		1 Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street a	ddress)
		Planida
-	(City)	, Florida (Zip Code)
	(City)	(Zip Code)
w Registered Agent's Signature, if changin		
reby accept the appointment as registered as		nd accept the obligations of the position.
	C17 D	1.4
Si	gnature of New Registered	i Ageni, 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>P</u>	Glenis Perez	5431 W 8th Lane Hialeah, FL. 33012	
<u>P</u>	Orlando Antigua	5431 W 8th Lane Hialeah, FL 33012	☑ Add □ Remove
	dditional sheets, if necessary). (Be		
<u>provisi</u>	mendment provides for an exchang ons for implementing the amendment of applicable, indicate N/A)		

The date of each amendment	(s) adoption: 2-28-11 (date of adoption is required)
Effective date if applicable:	(date of adoption is required)
in applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	e adopted by the board of directors without shareholder action and shareholder e adopted by the incorporators without shareholder action and shareholder
selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court sinted fiduciary by that fiduciary)
	Orlando Antigua
	(Typed or printed name of person signing)
	President
	(Title of person signing)