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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORATION:	Qui ceve	L Capi	12:05:04:0	Corp		
DCUMENT NUMBER: P 130000 56137.						
The enclosed Articles of Amendment	and fee are submitted for	filing.				
Please return all correspondence conce	erning this matter to the f	ollowing:				
	Alejanda	o 94:	CKNO			
	Name o	f Contact Perso	n			
	Quice vel	Care	(kno (kno	Corp.		
	Fir	n/ Company	·			
	5196 Hawkstone Dr.					
		Address				
	Sanjor	d, FL	32771.			
	City/ St	ate and Zip Coc	le			
	elquic	e @ me	. com			
F-mail add	E-mail address: (to be used for future annual report notification)					
2		· · · · · · · · · · · · · · · · · · ·				
For further information concerning this	s matter, please call:					
-	•					
Alejandro Q	vi ceno	at (407	455.3	720		
Name of Contact Perso	n	Агеа Со	ode & Daytime Teleph	one Number		
Enclosed is a check for the following a	unount made payable to	the Florida Dep	partment of State:			
\$35 Filing Fee \$43.75 F Certificat	te of Status Certifi	5 Filing Fee & ed Copy onal copy is ed)	□\$52.50 Filing Fe Certificate of Sta Certified Copy (Additional Copy is enclosed)	tus		
Mailing Address		Street	Address			
Amendment Section		Amendment Section				
Division of Corporat		Division of Corporations				
P.O. Box 6327			Centre of Tallahassee			
Tailahassee, FL 323	14	2415	N. Monroe Street, St	uite 810		
			assee, FL 32303			

Articles of Amendment to Articles of Incorporation

FILED

Care 12:01-40 Quicevel (Name of Corporation as currently filed with the Florida Dept., of State) P230000 56137
(Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Alejandro Aviceno
5196 Havirstone Dr.
(Florida street address) Name of New Registered Agent Sanford , Florida 32771 (City) (Zip Code) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	<u>_p</u>	Alejandro Qui ceno	5196 Haw stone Dr.
Add			Sanford, 1-L 32771.
Remove			
2) Change			
Add			
3) Remove Change	Р	Gerardo Oviceno	5196 Flawkston Dr.
Add			Soinford, FL 32771
X Remove	O		
4) Change	<u> P</u>		
Add			
Remove		To a Puittus	
5) Change		Tomas Quiceno	Hatboro PA 19040
Add			Hatboro, PA 19040
Remove			
6) Change			
Add			
Remove			

	(Be specific)
,	
If an amandment provider for an evol	vanue realisesification or cancellation of issued charac
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file do	ate)
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requirempartment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without share	reholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the officient for approval.	amendment(s)
	proved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amenda	
"The number of votes east	for the amendment(s) was/were sufficient for approval	
bv		
<u> </u>	(voting group)	
Dated	8/24/23 Plant of	
Signature	all of	 ,
selecte	irector, president or other officer – if directors or utilicers had, by an incorporator – if in the hands of a receiver, trustee, led fiduciary by that fiduciary)	
	Alejandro Quiceno	a
	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	