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Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



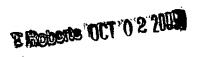
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Amend

DIVISION OF CORPORATIONS

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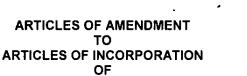


TRANSMITTAL LETTER

BEST QUICK TAX RETURNS, INC 320 S. BUMBY AVE. SUITE 10 ORLANDO,FL 32803

I am enclosing a check of \$ 35 dollars, please send me a stamped copy of the articles.

Thank you





PROVIDER TRANSPORT, INC P04000091552

Pursuant to the provisions of Section 607-1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number (s) being amended, added, or deleted)

ARTICLE IV

The number of shares the corporation is authorized to issue is:

100

ARCENIO R. MERA 710 REDGRAVE RD DAVENPORT, FL 33837 100 SHARES

ARTICLE V

The name and Florida Street address of the register agent is:

ARCENIO R. MERA 710 REDGRAVE RD DAVENPORT, FL 33837

ARTICLE VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: P
EDMUNDO SANCHEZ ------ 55 SHARES ------ DELETE
120 MARTY BLVD
ALTAMONTE SPRINGS, FL 32714

Title: P
ARCENIO R. MERA ------ 100 SHARES
710 REDGRAVE RD
DAVENPORT, FL 33837

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

THIRD: The date of each a	amendment's adoption: RETROACTIVE April 10 th, 2008.
FOURTH: Adoption	of Amendment (s) (CHECK ONE)
	dment(s) was/were approved by the shareholders. The number of votes cast
	/were sufficient for approval. dment(s) was/were approved by the shareholders through voting groups. The
following statement must be	be separately provided for each voting group entitled to vote separately on the
amendment(s): "The number of votes case	st for the amendment(s) was/were sufficient for approval
by	"
	oting group
	dment(s) was/were adopted by the incorporators without shareholder action d shareholder action was not required.
Signed this 24th day of Sep	otember 2009
Signature:	76
(By the Chairm	nan of Vice Chairman of the Board of Directors, President or other officer if
adopted by the shareholde	
	OR
	(By a director if adopted by the directors)
	OR
	(By an incorporator if adopted by the incorporators)
	ARCENIO R. MERA
	Typed or printed name
	PRESIDENT/DIRECTOR
	Title

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

THE PERSON OF TH

PURSUANT TO THE PROVISIONS OF SECTION 607.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORPORATION IS:

PROVIDER TRANSPORT, INC

2. THE NAME AND ADDRESS OF THE REGISTERED **AGENT/REGISTERED OFFICE IS:**

ARCENIOR MERA 710 REDGRAVE RD

HAVING BEEN NAMED THE REGISTERED AGENT/REGISTERED OFFICE AND TO ACCPET SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY.

I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION ON AS REGISTERED AGENT.

REGISTERED AGENT SIGNATURE