## Florida Department of State

**Division of Corporations Electronic Filing Cover Sheet** 

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(((H130001886023)))



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Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

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### COR AMND/RESTATE/CORRECT OR O/D RESIGN COVENANT ALLIANCE GROUP, INC.

Certificate of Status	0
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Page Count	05
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Articles of Amendment to

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Articles of Incorporation
of

	of		A MANTEN
Covenant Al	liance Group	, inc.	FORE
Name of Corporation as currently filed with	· · · · · · · · · · · · · · · · · · ·	ate)	<b>-</b>
P9700	0092145		
(Document Number of Corpora	ation (if known)		<b>-</b> '
russiant to the provisions of section 607.1006, Florida Statute is Articles of Incorporation:	s, this Florida Profit Cor	poration adopts the following	g amendment(s)
. If amending name, enter the new name of the corporati	ion:		
	· · · · · · · · · · · · · · · · · · ·	<u></u>	The new
ama must be distinguishable and contain the word "corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc., word "chartered." "professional association," or the abbrevial.  Enter new principal office address. If applicable: Principal office address MUST BE A STREET ADDRESS.)  Enter new mailing address, if applicable: (Mailing address MAT BE A POST OFFICE BOX)	," or "Co". A professio iation "P.A."	nal corporation name must	contain the
			<u> </u>
). If amending the registered agent and/or registered office a new registered agent and/or the new registered office a Name of New Registered Agent		ter the name of the	
		<del></del>	
(PEC	orida streat address)		
New Registered Office Address:		, Florida	-
	(City)	(Zip Code)	•
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am fa	Agent: miliar with and accept the extered Agent, if changing	e obligations of the position.	

Page 1 of 4

W13000190502

# H13000188332

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 latter 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.

X Change	et lo	nn Doe	
X Remove	<u>V</u> : <u>Mi</u>	ike Janes	
X Add	SV Sal	ily Smith	
Type of Action (Check One)	Tide	Name	<u>Address</u>
t)Change	D	Navid Beg	375 Park Avenue Suite 2607
Add			New York, NY 10152
X_Romove			
•		•	•
2) Change	<del></del>		
Add			
Remove		•	
3) Change			
Add			
Remove			
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4)Change			
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Remove			
5)Change			
Add			
Remove			
6) Change	<del></del> ,		
Add			
Remove	•	·	

Page 2 of 4

## R130001108802

•	(Be specific)
<u> </u>	
<u>,</u>	·
an amendment provides for an exclusive sons for implementing the ame (if not applicable, indicate N/A)	happe, reclassification, or currellation of issued shares, endment if not contained in the amendment itself:
rovisions for implementing the ame	happe, reclassification, or canocilation of issued shares, endment if not contained in the amendment itself:
rovisions for implementing the ame	happe, reclassification, or cancellation of insued shares, endment if not contained in the amendment itself:
rovisions for implementing the ame	hopes, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself;
rovisions for implementing the ame	hope, reclassification, or cancellation of issued shares, endment it for contained in the amendment itself:
provisions for implementing the ame	hoppe, reclassification, or cancellation of insued shares, endment if not contained in the amendment itself;
provisions for implementing the ame	hopes, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

## ¥15000166602

The date of each amendment(s) ad	August 16, 2013	if other than t
date this document was signed.		n bunk umb t
Effective date if applicable:		
	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)	
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.	
	noved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/ware 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.	gied by the incorporators without shareholder action and shareholder	
Dated Aug	gust 16, 2013	
Signature	AA	
(By a d selecte	irector, 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 ted fiduciary by that fiduciary)	
	Kathleen Roberton	
	(Typed or printed name of person signing)	<del></del>
₩,	CEO/Director	
*	(Title of person signing)	<del></del>



August 27, 2013

#### FLORIDA DEPARTMENT OF STATE

MIAMI EXCELLENCE MEDICAL CENTER INC

8000 NW 7 ST., SUITE 102,104 MIAMI, FL 33126

SUBJECT: MIAMI EXCELLENCE MEDICAL CENTER INC

REF: P13000049400

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

On page 2, please clarify the type of action to be taken requarding the amending of officers/directors.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II FAX Aud. #: H13000189947 Letter Number: 713A00020338

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AUG 28 2013

K. WHITE

P.O BOX 6327 - Tallahassee, Florida 32314