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TO: Amendment Section

COVER LETTER

Division of Corporations NAME OF CORPORATION: Murai Wald Biondo & Moreno, P.A. DOCUMENT NUMBER: F48429 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Maria Victoria Currais, Esq. Name of Contact Person Murai Wald Biondo & Moreno, P.A. Firm/ Company 1200 Ponce de Leon Boulevard Address Coral Gables, FL 33134 City/ State and Zip Code mcurrais@mwbm.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (305 441-0101 ext. 218

Area Code & Daytime Telephone Number Maria Victoria Currais, Esquire Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

н 13000 Б 2 1 93 E

Articles of Amendment to Articles of Incorporation of 2013 MAR -8 PM 3:51
SECRE TARY OF STATE
FALLAHASSEE, FLORIDA

Murai Wald Biondo & Moreno, P.A.

F48429		
(Document Number of Co	orporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following a	amendment(s) to
A. If amending name, enter the new name of the corp	poration:	
Murai Wald Biondo Moreno Pegg;	P.A	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the ab	"corporation," "company," or "incorporated" or the abb. "Inc," or "Co". A professional corporation name must co. bbreviation "P.A."	reviation ntain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR.	PESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. <u>If amending the registered agent and/or registered</u> new registered agent and/or the new registered of		
Name of New Registered Agent		
·	(Florida street address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	tered Agent: am familiar with and accept the obligations of the position.	
Signature of New	Registered Agent, if changing	

FAX AUDIT NUMBER: H130000528493

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.

X Change	PT	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	-		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			***
5) Change			
Add			
Remove			
6) Change			
Add			
Remové			

famending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
an amendment provides for an exch	change, reclassification, or cancellation of issued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself;	
(ij noi applicable, maicale (wit)		

The date of each amendment(s)	adoption: March 8, 2013
Effective date if applicable:	farch 9, 2013
Elicente date ir applicable.	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder
Dated Marc	h,6, 2013
Signature	h 6, 2013
(By a soley	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Rene V. Murai
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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