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SECRETARY OF STATE
SECRETARY OF STATE

(7mc) NOV 25 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	Wheeled Coa	ch Industries, Inc.	<u></u>
DOCUMENT NUMBER:	G42895		
The enclosed Articles of Amend	ment and fee are su	bmitted for filing.	
Please return all correspondence	concerning this ma	tter to the following:	
	ldy Moeller -	- Sales Support	
<u></u>		Name of Contact Person	1
	Wheeled Co	oach Industries, Inc.	
		Firm/ Company	
	2737 N. For	syth Road	
		Address	
	Winter Park	c, FL 32792	
		City/ State and Zip Cod	e
	idv.moeller@	@us-ambulance.com	
E-ma	nil address: (to be us	sed for future annual report	notification)
For further information concerni	ng this matter, pleas		
ldy Moeller		at (_407	677-7777
Name of Contact	Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	wing amount made	payable to the Florida Depa	artment of State:
_	3.75 Filing Fee & rtificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Adda Amendment S Division of Co P.O. Box 6327 Tallahassee, F	ection orporations	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

of Wheeled Coach Industries, Inc. (Name of Corporation as currently filed with the Florida G 42895 (Document Number of Corporation (if known	13 MOV 20 PM 4:51 SECRETARY OF STATE Dept. of State) I-AHASSES STATE
G-42895	Dept. of State) 1-Allasses of the
G-42895	Dept. of State) AllASSES Cont.
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rsuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	a Profit Corporation adopts the following amendment
If amending name, enter the new name of the corporation:	
	The new
me must be distinguishable and contain the word "corporation," "co orp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A rd "chartered," "professional association," or the abbreviation "P.A."	
Enter new principal office address, if applicable: incipal office address MUST BE A STREET ADDRESS)	
	·
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the
new registered agent and/of the new registered office address.	
Name of Nav Pagistand Agent	
Name of New Registered Agent	
Name of New Registerea Agent	
Name of New Registerea Agent (Florida street addi	'ress)
(Florida street addı	,
	ress), Florida (Zip Code)

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	<u>PT</u>	John Doe						
X Remove	<u>v</u>	Mike Jones						
X Add	<u>sv</u>	Sally Smith						
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s					
1)Change	_VP	Scott L. Barnes	2737 North Forsyth Road					
X_ Add			Winter Park, FL 32792					
Remove								
2) Change	,	_						
Add								
Remove								
3) Change								
Add								
Remove								
4) Change								
Add								
Remove								
5) Change								
Add								
Remove								
0 0								
6) Change								
Add								
Remove								

amending or adding additional Articles, enter change(s) here: ttach additional sheets, if necessary). (Be specific) Adding Scott L. Barnes as Vice President of Sales										
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rovi	sions fo	r impler	vides for a nenting t indicate	he ameno	nge, reclas	sification, ot contain	or cancel ed in the a	lation of is mendment	sued share itself:	<u>es,</u>

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The date of each amendment(s) ad date this document was signed.	loption:	, if other than the
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Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
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) fficient for approval.	
	roved 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/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Signature	11/18/13	_
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)	
	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	_CEO	_
	(Title of person signing)	