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To:  
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Fax Number : (850) 205-0380

From:  
Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

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DIVISION OF CORPORATIONS

**BASIC AMENDMENT**

**BACK ON TRACK EDUCATIONAL FORMAT CORP.**

Certificate of Status	0
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BACK ON TRACK EDUCATIONAL FORMAT CORP.

ARTICLES OF AMENDMENT

OF

ARTICLES OF INCORPORATION

PURSUANT TO THE PROVISION OF SECTION 617.006, FLORIDA STATUTES, THIS CORPORATION ADOPTS THE FOLLOWING ARTICLES OF AMENDMENT TO ITS ARTICLES OF INCORPORATION:

- 1) ARTICLE V- The name and address of each officer/director is/are:

*added*

JOSE A VARGAS,	P/D	421 SE 8 <sup>TH</sup> AVE; MIAMI, FLORIDA 33010
MIGUEL HERNANDEZ, MD	VP/D	421 SE 8 <sup>TH</sup> AVE; MIAMI, FLORIDA 33010
ROBIN PETERSON	S/D	421 SE 8 <sup>TH</sup> AVE; MIAMI, FLORIDA 33010
ANA ROSARIO	T/D	421 SE 8 <sup>TH</sup> AVE; MIAMI, FLORIDA 33010

*deleted*

MIRIAM E GONZALEZ  
DACIER VALDES  
ALEXANDER VALDES

- 2) ARTICLE VI- The name and Florida street address of the registered agent is:

JOSE A VARGAS	421 SE 8 <sup>TH</sup> AVENUE MIAMI, FLORIDA 33010
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- 3) THE DATE OF EACH AMENDMENT'S ADOPTION IS JUNE 30, 2004.  
4) ADOPTION OF AMENDMENT(S) WERE ADOPTED BY THE BOARD OF DIRECTORS WITHOUT MEMBER ACTION AND NO MEMBER ACTION WAS REQUIRED.

SIGNED THIS 30<sup>TH</sup> DAY OF June 30, 2004

SIGNATURE

*Jose A Vargas*  
JOSE A VARGAS, CHAIRMAN

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CERTIFICATE DESIGNATING (OR CHANGING) PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THE STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First-That BACK ON TRACK EDUCATIONAL FORMAT CORP.  
(NAME OF CORPORATION)

desiring to organize under the laws of the State of FLORIDA  
(FLORIDA)

with its principal office, as indicated in the articles of incorporation at City of MIAMI county  
(CITY)

of DADE State of FLORIDA  
(COUNTRY) (STATE)

has named JOSE A. VARGAS  
(NAME OF RESIDENT AGENT)

located at 421 SE 8th AVENUE; MIAMI FL 33010  
(STREET ADDRESS AND NUMBER OF BUILDING,  
POST OFFICE BOX ADDRESS NOT ACCEPTABLE)

city of FLORIDA County of DADE  
(CITY) (COUNTRY)

State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGEMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

BY

[Signature]  
SIGNATURE  
REGISTERED AGENT

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