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| (Re | equestor's Name) | |
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| (Cit | y/State/Zip/Phone | e #) |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: GROUP 75, INC. | | | | |
|--|--|--|--|--|
| DOCUMENT NUMBER: H03000303328 3 | | | | |
| The enclosed Articles of Amendment and fee are submitted for filing. | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| LUIS E. DOMINGUEZ | | | | |
| (Name of Contact Person) | | | | |
| GROUP 7 (Firm/ | 5, INC. | | | |
| 10516 SW 74 LN | | | | |
| (Ac | ldress) | | | |
| MIAMI, FLORIDA 33173 | | | | |
| (City/ State/ | and Zip Code) | | | |
| For further information concerning this matter, | please call: | | | |
| LUIS E. DOMINGUEZ | at (305) 274-2655 | | | |
| (Name of Contact Person) | (Area Code & Daytime Telephone Number) | | | |
| Enclosed is a check for the following amount: | | | | |
| 」\$35 Filing Fee □ \$43.75 Filing Fee & Certificate of Status | | | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399 | | | |

Articles of Amendment to Articles of Incorporation of

| (Name of corporation as currently filed with the Florida Dept. of State) | |
|--|---------------|
| (Name of corporation as currently filed with the Frontia Dept. of State) | |
| | OU AUG |
| اسم. احلا | 도 글 |
| H03000303328 3 | ਰ ੂ |
| (Document number of corporation (if known) | <u>}</u> 5 |
| PARTIES TO THE STATE OF THE STA | ~ ∞ "0 |
| Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit | |
| Corporation adopts the following amendment(s) to its Articles of Incorporation: | 15 5 |
| ATOMY COMMON AFTER MARKET (See Longing). | <u>}</u> 24 |
| NEW CORPORATE NAME (if changing): | • |
| N/A | |
| (must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like in | nport in |
| language; "Company" or "Co." may not be used in the name of a not for profit corporation) | - |
| | |
| AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article | |
| Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) | |
| ARTICLE III PURPOSE OF THE CORPORATION WILL BE AS FOLLOWS: | |
| , attioned in the state of the | |
| ARTICLE III PURPOSE | <u> </u> |
| | E! 50.17 |
| THE PURPOSE FOR THIS CORPORATION WILL BE SPECIFICALLY, BUT NOT LIMITED, TO H | ELPINC |
| SINGLE MOMS ON WELL FARE, REGARDLES OF THEIR AGE, RACE, RELIGION, AND NATION | VALITY |
| | |
| TO GET OFF WELL FARE. | |
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(continued)

(Attach additional pages if necessary)

| The date of adoption of the amendment(s) was: AUGUST 5TH/ 2004 | 2344 |
|---|--------------|
| Effective date if applicable: INMEDIATLY AUGUST 5th /2004 | |
| (no more than 90 days after ameridment file date) | |
| Adoption of Amendment(s) (CHECK ONE) | *** |
| The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval. | |
| There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors. | |
| Signed this 5TH day of AUGUST , 2004 | - |
| Signature Aug E | |
| (By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.) | |
| LUIS E. DOMINGUEZ | |
| (Typed or printed name of person signing) | |
| SECRETARY | 2. |
| (Title of person signing) | |

FILING FEE: \$35