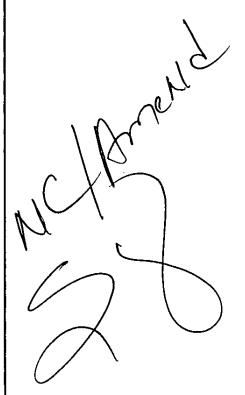
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(Re	questor's Name)
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Certified Copies	Certificates of Status
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Special Instructions to	Filing Officer:
	Office Use Only
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SECRETARY OF JAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATIO	N: SIR Profession	nals Inco	orporated			
DOCUMENT N	U MBER: <u></u>	N09000000682					
The enclosed Arti	icles of Ame	endment and fee are sub	mitted for	filing.			
Please return all c	orresponde	nce concerning this matt	er to the fo	llowing:			
		Marybeth	Hall-Mcl	Daniel			
		(Name of	Contact Pe	erson)			
		SIR Professi	onals Inc	orporated			
		(Firm	/ Company	')			
	arporendi.	314 La	Jolla Ave	nue	i varangesta	,	
;	garagan ayar Masyantara a	(A	Address)	As admissi	Syc. In of		
_		Sun City Cen				<u> </u>	t ;
		(City/ Stat	te and Zip (Code)		,	
_	E-	E63.M6.S858			rt notification)	
For further inform	nation conce	erning this matter, please	e call:				
Marybeth Hall-	-McDanie		at (813	943-6111	•	
(Na	ame of Cont	act Person)		(Area Code	& Daytime T	elephone N	lumber)
Enclosed is a chec	ck for the fo	llowing amount made p	ayable to ti	he Florida D	epartment of S	State:	
		43.75 Filing Fee & ficate of Status	Certifi	.75 Filing Fe ed Copy ional copy is	(\$52.50 F Certificate of Certified Co	of Status
			enclos			(Additional is enclosed	Сору
	1ailing Add			Street Add			-
Amendment Section Division of Corporations			Amendment Section				
	O. Box 632	•		Division of Clifton Buil	Corporations —		
	allahassee, F				tive Center Circ	ele	

Articles of Amendment to **Articles of Incorporation** of

Maria Maria Oca Maria Oca

SIR Professionals Incorporated

(Name of Corporation as currently filed with the Florida Dept. of State)

N09000000682

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

	iatores Group Ind	· · · · · · · · · · · · · · · · · · ·	
he new name must be distinguishable an bbreviation "Corp." or " Inc." <u>"Compan</u> y			" or the
. Enter new principal office address, if Principal office address <u>MUST BE A STR</u>			
. Enter new mailing address, if applica	bla		
(Mailing address MAY BE A POST OF		P.O. Box 55 Tampa A	86
		1 ama F	
		33675	
. If amending the registered agent and/ new registered agent and/or the new i		33675 address in Florida, enter the na	me of the
		33675 address in Florida, enter the na	me of the
new registered agent and/or the new i	egistered office add	33675 address in Florida, enter the na	me of the
Name of New Registered Agent:	egistered office add	33675 address in Florida, enter the na	
new registered agent and/or the new in Name of New Registered Agent:	registered office add	address in Florida, enter the nateress: da street address) (City) Florida (Zip)	

Page 1 of 3

<u>lf amendi</u>	ng the Officers and	lor Directors, enter	the title and name of t	ach officer/dir	ector heing
<u>removed a</u> (Attach ad	i nd title, name, and ditional sheets, if ne	i address of each O ecessary)	fficer and/or Director l	being added:	
<u>Title</u>	<u>Name</u>	·	Address		Type of Action
					☐ Add
		-			☐ Remove
				/	
				<u></u>	☐ Add ☐ Remove
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E. If ame	nding or adding ad	<u>lditional Articles, e</u>	(. nter change(s) here:		
(attach	additional sheets, if	necessary). (Be s	necific)		
					
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The date of each amendment(s) adoption:	10/06/10
Effective data if anniceptes	(date of adoption is required)
Effective date <u>if applicable</u> : (no more t	han 90 days after amendment file date)
Adoption of Amendment(s) (CHEC	CK ONE)
The amendment(s) was/were adopted by the mas/were sufficient for approval.	embers and the number of votes cast for the amendment(s)
There are no members or members entitled to adopted by the board of directors.	vote on the amendment(s). The amendment(s) was/were
have not been selected, other court appointed fi	the chairman of the board, president or other officer-if directors by an incorporator – if in the hands of a receiver, trustee, or duciary by that fiduciary) HHAL-McDautel dor printed name of person signing)
	President
	(Title of person signing)

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