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TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: ASSURE, INC.		
DOCUMENT NUME	D00000068837		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	KATALINA PENARANDA	, ESQ.	
		Name of Contact Persor	1
	GUTTENMACHER, BOHA	TCH & PENARANDA, P.	Α.
		Firm/ Company	
	7301 SW 57th Court, Suite 5	60	
		Address	· · · · · · · · · · · · · · · · · · ·
•	South Miami, FL 33143		
		City/ State and Zip Code	2
knone	uranda@gbptaxlaw.com		
	- - ·	sed for future annual report	notification)
	E-man hagress. (to be us	sed for ratare united report	notineation)
For further information	concerning this matter, pleas	se call:	
Katalina Penaranda		at (666-1040
Name (of Contact Person		de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Passee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

ASSURE, INC.

(Name of Co	rporation as currently filed with the Flor	ida Depti of State
	P00000068827	and the second second
	(Document Number of Corporation (if know	vn) Thewaitassee, i Lunium
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	5, Florida Statutes, this <i>Florida Profit Corpo</i>	ration adopts the following amendment
A. If amending name, enter the new name of	of the corporation:	
		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "Co". A professional	"incorporated" or the abbreviation corporation name must contain the
B. Enter new principal office address, if ap		
(Principal office address <u>MUST BE A STRE</u>	ET ADDRESS)	
	-	
		
C. Enter new mailing address, if applicable		
(Mailing address <u>MAY BE A POST OFF</u>	ICE BOX)	
D. If amounting the registered egget and/on	. manistance of the manistance in Electric control	Ab
D. If amending the registered agent and/or new registered agent and/or the new reg		'the name of the
Name of New Projectured Asset		
Name of New Registered Agent		
	(Florida street address)	
	(1 to the street day essy	
New Registered Office Address:	(City)	, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if chang	zing Registered Agent:	
I hereby accept the appointment as registered	agent. I am familiar with and accept the oi	bligations of the position.
	Signature of New Registered Agent, if ch	anging
	· · · · · · · · · · · · · · · · · ·	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. Th 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 Ch. Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example:				
X Change	<u>PT</u>	John Doe		
X Remove	Y	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	Address	
1) Change	VP, D	ANDREA MAENZ	7520 SW 57th Ave	
Add		· · · · · · · · · · · · · · · · · · ·	Suite F	
X Remove			Miami, FL 33143	
2) Change	s, T	CAROLA PIMENTEL	7520 SW 57th Ave	
XAdd			Suite F	
Remove			Miami, FL 33143	
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
δ) Change				
Add				
Remove				

E.	If amending or adding additional Artic (Attach additional sheets, if necessary).	(Be specific)	
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F.	If an amendment provides for an exchiprovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:	
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_		······································	<u> </u>
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The date of each amendment(s) adoption:	, if other th
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this da document's effective date on the Department of State's records.	te will not be listed :
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	;)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	at
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8 21 / 2019	
Signature Dawa Buittle	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)	t
CAROLA PIMENTEL	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	