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06/05/06--01019--024   **35.00

Amend

T. Roberts   JUN 1 2 2006

FILED
06 JUN -5 AM 10: 50
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

COVER LETTER

TO: Amendment Section
    Division of Corporations

NAME OF CORPORATION: *IMMIGRATION LAW CENTER, INC.*

DOCUMENT NUMBER: *PO10000 47265*

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ARON M. MANDL
(Name of Contact Person)

IMMIGRATION LAW CENTER, INC
(Firm/ Company)

P.O. Box 640088
(Address)

MIAMI FL 33164
(City/ State and Zip Code)

For further information concerning this matter, please call:

ARON M. MANDL at (*305*) *957-7000*
(Name of Contact Person)   (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☑ $35 Filing Fee   ☐ $43.75 Filing Fee &   ☐ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
                   Certificate of Status   Certified Copy   Certificate of Status
                                         (Additional copy is   Certified Copy
                                         enclosed)   (Additional Copy
                                                           is enclosed)

Mailing Address	**Street Address**
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

IMMIGRATION LAW CENTER

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

_P01000047265_

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

ADDING AS A DIRECTOR:

HEIDI R. MANDL
P.O. BOX 640088
MIAMI, FL 33164

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: _MAY 30, 2006_

Effective date if __applicable__: _MAY 30, 2006_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)   **(CHECK ONE)**

[✓] The amendment(s) was/were approved 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 statement must be separately provided for 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)

[ ] The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

[ ] The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature _____

(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 court appointed fiduciary by that fiduciary)

ARON M. MANDL

(Typed or printed name of person signing)

PRESIDENT / DIRECTOR

(Title of person signing)

FILING FEE: $35