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Fax Number : (850)205-0380

From:

Account Name : BASIC ACCOUNTING SERVICES

Account Number : 120020000083 Phone : (305)887-4185

Fax Number

: (305)887-5018

BASIC AMENDMENT

ALPHA INSURANCE & MANAGEMENT SERVICE INC.

Certificate of Status	0
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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

Pebruary 26, 2003

ALPHA INSURANCE & MANAGEMENT SERVICE INC. 11398 W FLAGLER ST #101 MIAMI, FL 33174

SUBJECT: ALPHA INSURANCE & MANAGEMENT SERVICE INC. REF: P01000058178

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please $call\ (850)\ 245-6880$.

Karen Gibson Document Specialist

FAX Aud. #: H03000062270 Letter Number: 503A00012349

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February 25, 2003

ALPHA INSURANCE & MANAGEMENT SERVICE INC. 11398 W FLAGLER ST #101 MIAMI, FL 33174

SUBJECT: ALPHA INSURANCE & MANAGEMENT SERVICE INC.

REF: P01000058178

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

SINCE ARTICLE VI CAN NOT BE CHANGED YOU MIGHT WANT TO PUT THE DISTRIBUTION OF SHARES UNDER ARTICLE V.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson Document Specialist FAX Aud. #: H03000062270 Letter Number: 503A00012150

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

P. 04

ARTICLES OF AMENDMENT TO ARTICLES OF INCORPORATION OF

ALPHA INSURANCE & MANAGEMENT SERVICE INC.

(present name)

P01000058178

(Document Number of Corporation (If known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida profit corporation adopts the following articles of amendment to its articles of incorporation:

FIRST: Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

ARTICLE V OFFICERS DIRECTORS
DELETE
MAYELIN SIGLER (DIRECTOR)
7830 SW 14 TERRACE
MIAMI, FLORIDA, 33144

ADD

ROSA S. PADRON (DIRECTOR)
2703 SW 127 AVENUE
MIAMI, FLORIDA, 33175
PRESIDENT, SECRETARY, TREASURER
(100 SHARES)

THE NEW REGISTERED AGENT OF THIS CORPORATION WILL BE:

ROSA S. PADRON 2703 SW 127 AVENUE MIAMI FLORIDA 33175

T ROSA S. PADRON HEREBY AM FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSABILITIES AS REGISTERED AGENT FOR SAID CORPORATION.

SECOND: If an amendment provides for an exchange, reclassification or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself, are as follows:

	2 - 2 - 4 - 4 - 3	
THIRD: T	he date of each amendment's adoption:	
FOURTH:	Adoption of Amendment(s) (CHECK ONE)	
کیر	The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) 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 y	Signed this 24th day of February 2003 I Rosa S. Fadeon accept Responsabilities as [and S feel new Registred agent.	
	(By the Chairman or Vice Chairman of the Board of Directors, Prayelent or other officer if adopted by the shareholders)	
	OR	
(By a director if adopted by the directors)		
	(by a uncolor is autopied by the discolors)	
OR		
	(By an incorporator if adopted by the incorporators)	
Rosas, Padrow (Typed or printed name)		
	Diporte Res Se & Treasurer	