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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	DAN	TE	ALZA	ASIOM	P.A.
Minima of Cold						
DOCUMENT NU	MBER:	701	000	50762	29_	
The enclosed Artic	les of Amendme	ent and fee are s	submitte	d for filing.		
Please return all co	rrespondence co	ncerning this n	natter to	the following:		
		DAN	TE	C. ALT	ZAMOR	<u>.</u> A
		(Name of C	Contact Pe	rson)		
	FUAC	ALZA	MOB	AD.	A .	
		(Firm/	Company)		•
	1294	3 15 C	AM	ACASO.	DR	
, , .		(Ad	ldress)			
	ORLA	(City/ State	and Zip C	L, 32	837	_ -
For further informa						
DANTE	ALZAM	ORA	at ('	407) 8	28-26	89
DANTE ALZAMORA (Name of Contact Person)			(Area Code & Daytime Telephone Number)			
Enclosed is a check	for the following	ng amount:				
\$35 Filing Fee	\$43.75 Filing Certificate of		Cert (Ad	75 Filing Fee & ified Copy ditional copy is closed)	Cei Cei (Ac	2.50 Filing Fee rtificate of Status rtified Copy dditional Copy enclosed)
Mailing Ad Amendment Division of P.O. Box 63 Tallahassee,	Section Corporations 27		Amen Divisi Cliftor 2661	Address dment Section on of Corporate a Building Executive Cent assee, FL 3230	er Circle	

Articles of Amendment to Articles of Incorporation of

DANTE ALZAMORA P. A.
(Name of corporation as currently filed with the Florida Dept. of State)
POIOOO76229 (Document number of corporation (if known)
(Document number of corporation (if known)
(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):
NEW CORPORATE NAME (if changing):
M/A
(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.")
<u>AMENDMENTS ADOPTED</u> - (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (<u>BE SPECIFIC</u>)
ARTICLE T FUITIAL OFFICES / DINECTORS. ADD OFFICER:
NAME: ERYSTAL ALZAMORA
12943 ISCAMORADA DR
ORLANDO, FL, 32887.
TITLE: VICE PRESIDENT / TREASURER.
(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: 10-03-05
Effective date if applicable:
(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 on officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court (appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
PRESIDENT DIRECTOR (Title of person signing)

FILING FEE: \$35