

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document,

(((H09000145465 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

Account Name : ALVEREZ & CARBONELL, P.L.

Account Number : I20070000029

Phone

: (305)444-5885

Fax Number

: (305)444-8986

COR AMND/RESTATE/CORRECT OR O/D RESIGN

FLORIDA CLAIMS EXPERTS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

6/17/200

Articles of Amendment to Articles of Incorporation of

FLORIDA CLAIMS EXPERTS, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P02000128213 (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:

name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof	designation "Corp," "In	c," or "Co". A professional corpo
B. Enter new principal office address, if appl Principal office address <u>MUST BE A STREE</u>		, <u>, , , , , , , , , , , , , , , , , , </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
		in Florida, enter the name of the
D. If amending the registered agent and/or renew registered agent and/or the new regis Name of New Registered Agent:		in Florida, enter the name of the
new registered agent and/or the new regis		·
new registered agent and/or the new regis Name of New Registered Agent:	tered office address:	

1. 2.4

<u> Fitle</u>	<u>Name</u>	Address	Type of Action
D	CRUZ, SASKIA	21052 SW 91 COURT	D Add
		CUTLER BAY FL 33189	☐ Remove
D	LOPEZ, BARBARA V.	3585 SW 129 Ave	—— ☑ Add
		MIAMI FL 33175	Remove
	mendment provides for an exchange		
provisi	mendment provides for an exchange ons for implementing the amendmen not applicable, indicate N/A)		
provisi	ons for implementing the amendmen		
provisi	ons for implementing the amendmen		
provisi	ons for implementing the amendmen		

The date of each amendmen	t(s) adoption: <u>05/13/2009</u>
Effective date if applicable:	05/13/2009
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	are approved by the shareholders through voting groups. The following statement and 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	и
-	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
· Dated	5/13/09
*Signature _	Xalia (my
	a director, president or other of der — if directors or officers have not been extend by an incorporator — if inche hands of a receiver, trustee, or other court
	winted fiduciary by that fiduciary)
	Sakia Cruz
	(Typed or printed name of person signing)
	Director
	(Title of person signing)