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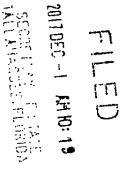
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Amendice

DEC 0 4 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: THE CASERTA G	ROUP, INC.		
DOCUMENT NUMB	ER: P03000020748			
•	of Amendment and fee are sub	omitted for filing.		
Please return all corres	oondence concerning this mat	ter to the following:		
	Joseph A. Spiriti			
-		Name of Contact Person	1	
	THE CASERTA GROUP. IN			
-	<u> </u>	Firm/ Company	-	
	15165 NW 77 Ave., Ste. 1001	, ,		
		Address		
	Miami Lakes, FL 33014			
-	 	City/ State and Zip Cod-	2	
jspirit	@esgfirm.com			
- · ·	E-mail address: (to be use	ed for future annual report	notification)	
For further information	concerning this matter, please	e call:		
Joseph A. Spiriti		305	463-8808	
Name of Contact Person		at (305) 463-8808 Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	ayable to the Florida Depa	artment of State:	
S35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	•	of .
THE CASERTA GROUP, INC.		
· <u></u>	of Corporation as cu	urrently filed with the Florida Dept. of State)
P03000020748		
	(Document Nur	mber of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statute	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ime of the corporati	ion:
ſ	VIA	The new
	ation "Corp," "Inc.	poration," "company," or "incorporated" or the abbreviation ," or "Co". A professional corporation name must contain the lation "P.A."
B. Enter new principal office address,	if applicable:	15165 NW 77 Ave., Ste. 1001
(Principal office address MUST BE A S		Miami Lakes, FL, 33014
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		15165 NW 77 Ave., Ste. 1001
·	 _	Miami Lakes, FL, 33014
		ce address in Florida, enter the name of the
new registered agent and/or the nev	<u>s' registered office a</u>	ddress:
Name of New Registered Agent		<u> </u>
	15165 NW 77 Ave.	 Ste. 1001
	<i>tFlo</i>	orida street address)
New Registered Office Address:	Miami Lakes	Florida 33014
		(City) (Zip Code)
New Registered Agent's Signature, if e		Agent: miliar with and accept the obligations of the position.
Therety herepaine approximation as region	a an again. I majer	

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and 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 = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office 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. There is 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 Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u>	<u>John De</u>	<u>oe</u>	•	
.X Remove	\underline{V}	Mike Jones			
X Add	<u>sv</u>	Sally Sr	nith		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) X Change	PST		David T Caserta		15165 NW 77 Ave., Ste. 1001
Add					Miami Lakes, FL, 33014
Remove					
2) Change		_			
Add					
Remove					
3) Change		_	·	·	
Add					
Remove					
4) Change	-	_			
Add					
Remove					
51 Change	-1				
Add					
Remove					
6) Change			·		
		_		,	, , , , , , , , , , , , , , , , , , , ,
Add Remove					

Attach additional sheets, if nec	essary). (Be spec	ific)			
		NIA			
<u>-</u>	<u> </u>	- N 1 '			
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			·		
f an amendment provides for	r a <u>n e</u> vchange, recl	lassification, or car	ncellation of issue	d shares.	
provisions for implementing	the amendment if	not contained in the	he amendment its	<u>elf:</u>	
(if not applicable, indicate	e N/A) (-	10.			
	N	JH			
		•	<u> </u>		
				<u> </u>	
		<u> </u>			

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file da	(e)
Note: If the date inserted in this block does not meet the applicable statutory filing requireme document's effective date on the Department of State's records.	nts, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the arby the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"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 action was not required.	shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shar action was not required.	eholder
Dated 11/29/17	
Signature	
(By a director, president or other officer – if directors or officers hav selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
David T. Caserta	
(Typed or printed name of person signing)	.
President	
(Title of person signing)	