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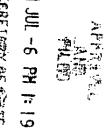
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GEORETARY OF CONTE



May 1

### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: FLORIDA GR	OUP ONE INC	
DOCUMENT NUM	1BER: <u>P04000101426</u>		
The enclosed Article	es of Amendment and fee are sub	omitted for filing.	
Please return all corr	espondence concerning this mat	ter to the following:	
	MARCOS	S P. SOCORRO	
	(Name of	Contact Person)	
	FLORIDA (	GROUP ONE INC	
	(Firm	n/ Company)	
	7350 NW	7 ST SUITE 204	
	(/	Address)	
	MIAM	II, FL 33126	
	(City/ Sta	te and Zip Code)	
<del></del>	RORTEGA@FLORID	AHEALTHSOLUTION.COI	M cation)
For further informati	on concerning this matter, please	e call:	
MARCOS P. SO	CORRO	at ( 305 ) 269-200	04
(Name	of Contact Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check f	or the following amount made p	ayable to the Florida Departmer	nt of State:
□ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☑ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis P.O.	ing Address Indment Section It ion of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

#### Articles of Amendment to Articles of Incorporation of

#### FLORIDA GROUP ONE INC.

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

#### P04000101426

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

Α.	If amending name	, enter the new name of the corporation:
4 **	II amonume name	, chich the new hante of the corporation.

The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not		
	ve useu in the nun	<u>rre</u> .
B. Enter new principal office address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Principal office address <u>MUST BE A STREET ADDRESS</u> )		
	,	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		···
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		, enter the name of the
Name of New Registered Agent:		<del></del>
New Registered Office Address: (Flori	da street address)	
		, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VD</u>	MARCOS SOCORRO	7350 NW 7 ST MIAMI FL 33126	☐ Add ☐ Remove
			_
E. If amend (attach ad	ling or adding additional Articles, en lditional sheets, if necessary). (Be sp	ter change(s) here: pecific)	
	·		

The date of each amendmen	t(s) adoption: JUNE 29, 2011
Effective date if applicable:	JUNE 29, 2011 (date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we was/were sufficient for app	ere adopted by the members and the number of votes cast for the amendment(s) proval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
	JE 29, 2011
_ Signature (By	the chairman or vice chairman of the board, president or other officer-if directors
hav	re not been selected, by an incorporator — if in the hands of a receiver, trustee, of er court appointed fiduciary by that fiduciary)
	MARCOS P. SOCORRO
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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