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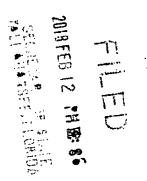
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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Amend

FEB 1 4 2018 I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: ABA-CORE SOFT	TWARE INC			
DOCUMENT NUMBE	R:				
	Amendment and fee are su	bmitted for filing.			
Please return all correspo	ondence concerning this ma	tter to the following:			
		JULIO C MOLINA			
-	Name of Contact Person				
	J C MOLINA & ASSOC				
_	Firm/ Company				
	8260 W FLAGLER STREET STE 2-C				
Address					
MIAMI FL 33144					
		City/ State and Zip Code	3		
	JULION	1G@BELLSOUTH.NET			
	E-mail address: (to be us	ed for future annual report	notification)		
For further information c	oncerning this matter, pleas				
JULI	O C MOLINA	at (<u>305</u>	559 9070		
Name of	Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	rtment 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)		
Amend Divisio P.O. B	g Address iment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment Articles of Incorporation of



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

•		
	Articles of A	10
•	to Articles of In	corporation
	of ABA-CORE SOFTW	'ARE INC
(Name	of Corporation as current	ly filed with the Florida Dept. of State)
	P05000055	276
	(Document Number of	of Corporation (if known)
rsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendmen
If amending name, enter the new na	ame of the corporation:	
	nation "Corp," "Inc," or	The new on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
Enter new principal office address,	if applicable:	8260 W FLAGLER STREET STE 2-C
rincipal office address <u>MUST BE A S</u>		MIAMI FL 33144
Enter new mailing address, if apple (Mailing address MAY BE A POST)		SAME
. If amending the registered agent an new registered agent and/or the new		ress in Florida, enter the name of the s:
Name of New Registered Agent	JULIO C MOLINA w Registered Agent	
	8260 W FLAGLER STRI	EET STE 2-C
	(Florida st	reet address)
	MIAMI	, Florida 33144
New Registered Office Address:		

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>Joh</u>	n Doe	
X Remove	V Mik	<u>ce Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PTD	RIGO MONTIEL	18422 Via De Sorrento
Add			Boca Raton, Fl. 33496
X Remove			
2) Change	<u>s</u>	ISOLINA MONTIEL	18422 Via Di Sorrento
Add			Boca Raton, Fl. 33496
x Remove			
3) Change	PD	CARLOS J LEDEZMA	8260 W Flagler Street Ste 2-C
Add			Miami, Fl. 33144
Remove			
4) Change	SD	REYNALDO A RAMIREZ	8260 W Flagler Street Ste 2-C
X Add			Miami, Fl. 33144
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·

f an amendment provides for an exchange, reclassification, or cancellation of issuprovisions for implementing the amendment if not contained in the amendment is (if not applicable, indicate N/A)	
provisions for implementing the amendment if not contained in the amendment i	
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provisions for implementing the amendment if not contained in the amendment i (if not applicable, indicate N/A)	ed shares,
(If not applicable, thatcale N/A)	self:

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	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 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)	
(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.	
Dated	
Signature	_
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
RIGO MONTIEL	
(Typed or printed name of person signing)	
PD	
(Title of person signing)	