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(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: Day Ord Arthar Save Authorization by Phone to CORRE Entity Name: Doc. # DATE 9-19-2013 DOG EXAM T. Carter				

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SECRETARY OF STATE TALLARYSSEE, FI ORIGI

SEP 1 9 2013 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: <i>COMFOL</i>	T WHEELCHAIR CAB INC	
DOCUMENT NUMB	er: <u>P0500</u>	00073833	
	of Amendment and fee are su		
Please return all corresp	pondence concerning this mat	tter to the following:	
	JACK	BELL	
-		SELL Name of Contact Person	
-	77,51	TAX Firm/ Company	
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	E-mail address: (to be us	COUP. US sed for future annual report notification)	
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For further information	concerning this matter, pleas	e call:	
XAWRA	ONUTAR.	786 > 779 7261	
Name o	f Contact Person	at (766) 229 7361 Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Department 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)	
Mailing Address		Street Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations	
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED SECRETARY OF STATE TALL AMASSEE OF ORIDA

13 SEP 11 AM 10: 53 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent DAM A ______, Florida_ New Registered Office Address: 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.

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	PT John I	<u>Doe</u>	
X Remove	V Mike	<u>Jones</u>	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PVTS	A.M.G. GROUP, INC	1735 NE 14254
Add			MAMI/ A 33/8
Remove			
2) Change	<u>P</u>	NDE SALDANA	19741 NW 57 /L
Add			HALTAH, Pa 33015
Remove	_		
3) Change	VP	SHEM SALDANA	19741 NW 57 PL
Add			HIALBAH, FR 33015
Remove		,	
4) Change			
Add			
Remove			
5) Change		/	
Add	/	/	
Remove			
0 6			
6) Change	/		/
Add	ν		
Remove			

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The date of each amendment(s) adoption: 9/5/13	: C - 4b 4b 4b -
late this document was signed.	, ii other than the
Effective date if applicable: 9/5/13 (no more than 90 days after amendment file date)	
(no more than 90 days after amendment file date)	
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 No deldano	
(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)	
NOE SALDAWA (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	