Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:	·	<b>X</b>	හ යා	<u> </u>
	Division of Corporations	S 28	<b>3</b>	
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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address: COR AMND/RESTATE/CORRECT OR O/D RESIGN MPA INSPECTIONS, INC. Certificate of Status

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## Articles of Amendment to Articles of Incorporation of

	<b>V</b> 2				
MPA INSPECT	TIONS, INC.				
(Name of Corporation as currently f	iled with the Flo	rida Dept, of State	)		
P050001	20851				
(Document Number of	Corporation (if l	cnown)	_		
Pursuant to the provisions of section 607.1006, Flor amendment(s) to its Articles of Incorporation:	ida Statutes, this	Florida Profit Co	rporation ado	pts the i	following
A. If amending name, enter the new name of the co	orporation:				
				_The n	
name must be distinguishable and contain the we abbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "profession.  B. Enter pay principal office address if applicable.	nation "Corp," " nal association,"	Inc," or "Co". A	professional c	orporati	ion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			- É	- ē	
C. Enter new mailing address, if applicable: (Mailing address MAY RE A POST OFFICE BO	 		AHASSEE, FLORIDA	106 30 PM 12: 05	
D. If amending the registered agent and/or register new registered agent and/or the new registered		s in Florida, enter	the name of t	– <u>he</u>	
Name of New Registered Agent:					
New Registered Office Address:	(Florida stree	•			
<del></del>		· · · · · · · · · · · · · · · · · · ·	Florida Code)		
	(City)	(Zip C	.oae)		
New Registered Agent's Signature, if changing Reg					
I hereby accept the appointment as registered agent.	1 am familiar wit	n and accept the ob	ugations of the	s positio	n
	re of New Registe	red Agent, if chang	ing		

## 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>	Name	Address	Type of Action
VP	JOSE SANCHEZ	850 NORTH MIAMI AVENUE APT W1702 MIAMI FL 33136	☑ Add □ Remove
S	DANIELA GOMEZ	850 NORTH MIAMI AVENUE APT W1702 MIAMI FL 33136	☑ Add ☐ Remove
<u> </u>	RAFAEL GARZON	850 NORTH MIAMI AVENUE APT W1702 MIAMI FL 33136	☑ Add □ Remove
	nending or adding additional Articles, e h additional sheets, if necessary). (Be s		
		· · · · · · · · · · · · · · · · · · ·	
	· · · · · · · · · · · · · · · · · · ·		
pro	a amendment provides for an exchange risions for implementing the amendment if not applicable, indicate N/A)		
· ·			

The date of each amendmen	(s) adoption: AUG, 30, 2010
•	(date of adoption is required)
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	we adopted by the shareholders. The mumber of votes cast for the amendment(s) eye sufficient for approval.
	to approved by the chareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The mumber of votes	east for the amendment(s) was/were sufficient for opproval
ե <b>y</b>	
	(voting group)
The amendment(s) was ive action was not required.	re adopted by the board of directors without shareholder notion and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without chareholder section and shareholder
Dottil AUC	3. 30, 2010
Signatue	An lan
· (B <sub>)</sub>	a director, provident or officer — if directors or officers have not been seted, by an incorporator — if in the hands of a receiver, nucleo, or other court suinted fiduciary by that fiduciary)
	MILDRED PEREZ
	(Typed or printed name of porson signing)
·	PRESIDENT
	(Title of person signing)