## 26600022893

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: FIRST QUALITY	LABORATORY INC	
DOCUMENT NUMB	ER: P06000022893	***	
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this made	ter to the following:	
I	LUZ F GARCIA		
_		Name of Contact Persor	1
I	FIRST QUALITY LABORA	TORY INC	
_		Firm/ Company	
1	1460 INTERCHANGE CIR	• •	
_		Address	
ì	MIRAMAR, FL 33025		
_	·	City/ State and Zip Code	<del></del>
FGAR	CIA@FIRSTQUALITYLAE	з.сом	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
LUZ F GARCIA		954 at (	de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	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)
Amer Divisi P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FIRST OUALITY LABORATORY INC

(Name of Compaction	ALCI J. M. AL. D. M. D.	
P06000022893	n as currently filed with the Florida Dept.	or State)
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this <i>Florida Profit Corporation</i> add	opts the following amendment(s) to
A. If amending name, enter the new name of the cor	poration:	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the al	"Inc," or "Co". A professional corporat	The newsparented" or the abbreviation the street tion name must contain the street the street that the street
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	RESS)	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>	<u> </u>	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida, enter the name ffice address:	e of the
Name of New Registered Agent		
	(Florida street address)	<del></del>
New Registered Office Address:	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I		of the position.
LUZ F GARCIA Signati	ure 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.

Example: X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
_X Add	<u>sv</u>	Sally Sn	n <u>ith</u>		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
1) Change		_			
Add					
Remove				<del></del>	
2) Change		_			
Add					
Remove					
3) Change		_			
Add		-			
Remove					
4) Ch				•	
4) Change		_		<u></u>	· ·
Add Remove					<del> </del>
Kemove					
5) Change		_			
Add					
Remove					
6) Change					
O) Change		_			
Auu					

E. If amending or adding additional Articles, enter change(s) he (Attach additional sheets, if necessary). (Be specific)	
	<u> </u>
<u></u>	
F. If an amendment provides for an exchange, reclassification, oppositions for implementing the amendment if not contained (if not applicable, indicate N/A)	or cancellation of issued shares, d in the amendment itself:
MARIA M GARCIA (PRESIDENT) 50% SHARE HOLDER	and
LUZ F GARCIA (VICE PRESIDENT) 50% SHARE HOLDER	
	<u> </u>
·	
	<del></del>

The date of each amendment(s) add	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> : NOV.	EMBER 2ND 2016	
<u></u>	(no more than 90 days after amendment f	île date)
Note: If the date inserted in this blo document's effective date on the Dep	ock does not meet the applicable statutory filing requestrement of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for ficient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The jeach voting group entitled to vote separately on the am	
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by	,	,,
	(voting group)	
action was not required.	oted by the board of directors without shareholder action to the board of directors without shareholder action and the board of directors without shareholder action action action and the board of directors without shareholder action actio	
action was not required.	ned by the meorporators without shareholder action an	a shareholder
Dated		
Signature		
	rector, president or other officer - if directors or officer	
	, by an incorporator – if in the hands of a receiver, trus	tee, or other court
appointe	ed fiduciary by that fiduciary)	
_	The Mal	
	(Typed or printed name of person signing)	
	VICE MESIOENT (WZF Guyca) Preside	ent (Hona Garua)
<del>-</del>	(Title of person signing)	