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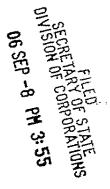
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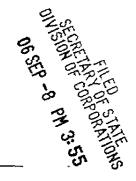
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	AMELIORATE	MANAGENENT	SERVICES INC
DOCUMENT NUMBER:	P060000 8	5602	
The enclosed Articles of Amendme	nt and fee are submit	ed for filing.	
Please return all correspondence co	ncerning this matter to	the following:	
Con	O ERCION HER (Name of Contact P	NAN DE Z erson)	<u></u>
AMR	LIORATE U (Firm/ Compan	ANAGEMENT	SEQUICES. INC.
13	895 Sい 3 ® (Address)	ST SUITE	# 101
	(City/ State and Zip	FL 331	75
For further information concerning	this matter, please cal	1:	
CONCECCION HEZWA (Name of Contact Person)		786) 290 (Area Code & Daytime T	8077 elephone Number)
Enclosed is a check for the following	g amount:		
\$35 Filing Fee \$43.75 Filing Sertificate of	Status Ge (A)	3.75 Filing Fee & rtified Copy dditional copy is nclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ame Divis Clifte	et Address ndment Section sion of Corporations on Building Executive Center Circ	le

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



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

	Po 60000	8=(a)
	(Document number of co	orporation (if known)
Pursuant to the provisions of adopts the following amend		da Statutes, this <i>Florida Profit Corporatio</i> Incorporation:
NEW CORPORATE NA	ME (if changing):	en e

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

I) DELETA OFFICER DIRECTOR NAME TULIO PEREZ, AND ADD

CONCERCION A. HERNANDER. TITLE. "PRESIDENT" FROM 13895 SW 38 ST

MIANI, FL. 33175 SWITE. # 101 AND ALSD ADD TO HANNA HERNANDER

THE "PRESIDENT" FROM 13895 SW 38 ST MIANI, FC 33175 SWITE 10

2) DEMONE REGISTED ACENT NAME EDSON MENDERA FROM

2459 NW 86 ST MIANI, FT 33147. THEN, AND CONCEPCION A.

HERNANDER FROM 13895 SW 38 ST MIAM, FT. 33175 AND TOHANNA

HERNANDER FROM 13895 SW 38 ST MIAM, FT. 33175.

CONCEPCION HERNANDER AND TOHANNA HERNANDER WILL BOTH BE PRESIDENTS

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption:
Effective date if applicable: 06 19 2006 (no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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)
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.
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, trustec, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
Date of the state
(Title of person signing)

FILING FEE: \$35