P08000042787

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COVER LETTER

TO: Amendment Section Division of Corporations Regis HR Group, Finc. NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: GISEILE DEL AMO
Name of Contact Person Zumpano Castro, LLC 500 S. DIXIE HIGHWAY #302

Address

Oral Gables F1 33143

City/ State and Zip Code giselle ortiz dela mo a wmpano (astro, com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Giselle Dei Amo at (305) 503-2990

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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment to Articles of Incorporation



Regis HR Group, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P080000 42787 (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 (Florida street address) 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.

Signature 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	PT Joh	n Doe				
X Remove	<u>V</u> <u>Mil</u>	Mike Jones				
X Add	SV. Sall	Sally Smith				
Type of Action (Check One)	Title	Name	<u>Addres</u> s			
1)Change	TS	Arnold Ledesma	10625 N. Kendall Di			
Add	•		M19M1, F1 33174			
X Remove						
2) Change	TIS	Carlos Saladrigas, Jr.				
Add Remove			miami, Fl 33176			
3) Change						
Add						
Remove						
4) Change	1 					
Add						
Remove						
5) Change	-					
Add	•		-			
Remove						
6) Change						
Add						
Remove						

	iling additional Ar heets, if necessary)	. (Be specifi	c)			
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f an amendment p	rovides for an exc	hange, reclas	sification, or car	cellation of issu	ed shares,	
provisions for imp	rovides for an exc elementing the am	endment if no	t contained in t	ne amendment it	self:	
126 12 12 1	ne, inaicale IV/A)					
(if not applicab					.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more th	an 90 days after amendment file date)
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's record	pplicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitle	
"The number of votes cast for the amendment(s) was	/were sufficient for approval
by	
by(voting group)	
The amendment(s) was/were adopted by the board of direct action was not required.	ctors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder
Dated 127/2016 Signature MA)
	officer – if directors or officers have not been in the hands of a receiver, trustee, or other court sary)
Cavios (Typed or prin	Saladrigas Jr. ted name of person signing)
	resident
(T	itle of person signing)