P080000014543

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COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: CLAIM ELE BER: P0800007654		ULTANTS INC.
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	LUIS TORRES		
		Name of Contact Perso	n
		Firm/ Company	
	13621 SW 16 ST	REET	
	D 4 4 5 5 1 00005	Address	
	DAVIE, FL 33325		
		City/ State and Zip Cod	le
luis	torres661@comc		
.	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
Luis Torres		_{at (} 954	, 309-5715
Name	of Contact Person		ode & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

CLAIM ELEMENTS CONSULTANTS INC. (Name of Corporation as currently filed with the Florida Dept. of State) P08000076543 (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: CLAIMS ELEMENTS CONSULTANTS INC The new 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." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: Florida (City) (Zip Code) 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 <math>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 Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove 3) Change		N/A	
Add	 		
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

(Attach additional sheets, if necessary	E. If amending or adding additional Articles, enter change(s) here:		
	i). (Be specific)		
N/A			
F. <u>If an amendment provides for an e</u>	xchange, reclassification, or cancellation of issued shares,		
provisions for implementing the a	mendment if not contained in the amendment itself:		
provisions for implementing the a (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:		
provisions for implementing the a (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:		
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provisions for implementing the a (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:		
provisions for implementing the a (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:		
provisions for implementing the a (if not applicable, indicate N/A)	mendment if not contained in the amendment itself:		

The date of each amendment(s) adoption: October 23, 2012		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.	
	proved by the shareholders through voting groups. The following statement 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 add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
DatedSignature	13-12	
(By a c	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)	
арропа	Luis Torres	
	(Typed or printed name of person signing)	
Officer / Director President		
	(Title of person signing)	