Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : TRAMILEX LLC.
Account Number : 120150000086
Phone : (786)469-9163
Fax Number : (305)848-3716

\*\*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
MIRACLE HEALTH SERVICES INC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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#### COVER LETTER

Division of Cor	porations		
NAME OF CORPO	PRATION: MIRACLE HEAL	TH SERVICES INC	
DOCUMENT NUM	D00000047769		
The enclosed Article	rs of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this man	ter to the following:	
	LIZI ROCHE		
	<u> </u>	Name of Contact Person	
	MIRACLE HEALTH SERV		
		Firm/ Company	
	8660 W FLAGLER ST STE		
		Address	
	MIAMI, FL 33144		
	•	City/ State and Zip Code	;
	•	•	
•	E-mail address: (to be us	sed for fitture annual report	notification)
For further informati	ion concerning this matter, pleas	e call:	
LIZI ROCHE		at ( ·	)
Nam	s of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle

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## H16000 2561183

FILED

Articles of Amendment to Articles of Incorporation of

2916 OCT 17 A 11: 08

MIRACLE HEALTH SERVICES INC (Name of C) P09000047768		TAN DE LA CONTRACTION OF LA CO
·		
P09000047768	orporation as curren	utly filed with the Florida Dept. of State
	•	
	(Document Number	of Corporation (If known)
Pursuant to the provisions of section 607.100 ts Articles of Incorporation:	6, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name	of the cornoration:	·
N/A		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association	n "Corp," "Inc," or	tion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the 1 "P.A."  N/A
<ol> <li>Enter new principal office address, if as Principal office address <u>MUST BE A STRI</u></li> </ol>		1741
Trucipa office dumess <u>moor para aria.</u>	in reporting ,	
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)	le: FICE BOX)	N/A
<ol> <li>If amending the registered agent and/o new registered agent and/or the new re</li> </ol>	r registered office ad gistered office addre	dress in Florida, enter the name of the
LI	ZI ROCHE	_
Name of New Registered Agent	60 W FLAGLER ST	STE 002
• • • • • • • • • • • • • • • • • • • •		31.5.203 .
•	(Florida)	street address)
86	(Florida . IAMI	<b>~</b>

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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 Doe			
X Remove	$\underline{\mathbf{v}}$	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
1)Change	PD	LIZI ROCHE	8660 W FLAGLER ST STE 203		
X Add			MIAMI, FL 33144		
Remove		,			
2) X Change	VP	DAYAMI SERPA	8660 W FLAGLER ST STE 203		
Add			MIAMI, FL 33144		
Remove					
3) Change			<u>, , , , , , , , , , , , , , , , , , , </u>		
Add					
Remove					
4) Change		<del></del>			
Add		·			
Remove	,				
5) Change	,	~ · · · · · <u>-</u>			
Add					
Remove					
δ) Change			·		
Add					
Remove					

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## H16000256118 3

	10/12/2016	
he date of each amendment ate this document was signed.		, if other than t
W MIS GOODING IL WAS SIRINGE.	10/12/2016	•
ffective date <u>if applicable</u> :	10/12/2010	
	(no more	s than 90 days after amendment file date)
ote: If the date inserted in to	his block does not meet the to Department of State's reco	e applicable statutory filing requirements, this date will not be listed as thords.
doption of Amendment(s)	(CHECK ONE	E)
The amendment(s) was/wer by the shareholders was/we		ers. The number of votes cast for the amendment(s)
		ders through voting groups. The following statement itled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) w	was/were sufficient for approval
by		
	(voting group)	
action was not required.	. ,	rectors without shareholder action and shareholder
10/12/	2016	
Dated	2010	<u> </u>
	A(!)	
Signature	y a director precident or other	er officer – if directors or officers have not been
		if in the hands of a receiver, trustee, or other court
· ap	pointed fiduciary by that fidu	uciery)
·	DAYAMI SERPA	•
	(Typed or pr	orinted name of pegson signing)
	PRESIDENT	Muc
		(Title of person signing)

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