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 : I20150000086

Phone

1: (786)469~9163

Fax Number

: (305)846-3716

**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
Certified Copy	0 :
Page Count	01
Estimated Charge	\$35.00

H14000281553

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: MIRACLE HEA	LTH SERVICES INC	·
DOCUMENT NUM	IBER:	•	
	s of Amendment and fee are s	submitted for filing.	
Please return all com	espondence concerning this m	atter to the following:	
	LIZI ROCHE		
		Name of Contact Perso	an an
	MIRACLE HEALTH SERV		
		Firm/ Company	
	8660 W FLAGLER ST STE	` '	
		Address	
	MIAMI, FL 33144		
		City/ State and Zip Cod	
		City, State and Sip Coc	ic ,
For further information	E-mail address: (to be u	sed for future annual report	notification)
LIZI ROCHE		786 at (531-4383
· Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	utment 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)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio Clifton	Address ment Section n of Corporations Building

Tallahassee, FL 32301

H170002818553

Articles of Amendment to Articles of Incorporation of

(Pocument Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) is Articles of Incorporation: N. If amending name, enter the new name of the corporation: N. If amending name, enter the new name of the corporation: N. If amending name, enter the new name of the corporation: N. If amending name, enter the new name of the corporation: N. If amending name, enter the new name of the corporation: N. If amending name, enter the new name of the corporation: N. If amending name, enter the new name of the corporation: N. If amending the registered agent and/or registered office address: N. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or registered office address: N. If amending the registered agent and/or registered office address: N. N. Name of New Registered Agent N. N	(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: N. If amending name, enter the new name of the corporation: N. If amending name, enter the new name of the corporation: N. A true 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 "PA." 8. Enter pew principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) MIAMI, FL 33144 **MIAMI, FL 33144 **M	(Name of Corporation a	s currentl	v filed with the Flori	da Dept. of State)		<u> </u>
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) is Articles of Incorporation: A. If amending name, enter the new name of the corporation: NA The new ame 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." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) MIAMI, FL 33144 Leater new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) MIAMI, FL 33144 MIAMI, FL 33144 A SECORE A POST OFFICE BOX NA SINGLE ADDRESS IN Florida, enter the name of the new registered agent and/or the new registered office address: NA Name of New Registered Agent N/A SSECORE (Florida street address) N/A SSECORE (Florida street address)	Principal office address, if applicable: Enter new mailing address, if applicable: (Mailing uddress MAY BE A POST OFFICE BOX) Miamen of New Registered agent and/or tregistered office address: NA [Florida street address] New Registered Office Address: [Florida street address] New Registered Office Address: [Florida street address] New Registered Office Address: [Florida Street address] Florida Florida Street address Florida Profits Corporation adopts the following amendment(s) to the standard corporation: The new amending name, enter the new name of the corporation: The new adversariance of the corporation of the corporation of the new registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: [Florida street address] [Florida Street address] Florida Florida Florida Florida Florida Florida Florida Florida				· — ··		
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Page 1 of 4

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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 stile by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Truster; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officeridirector 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	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	,
Type of Action (Check Onc)	Title	<u>Name</u>	Address .
1) Change		<u> </u>	
Add			
Remove			
2) Change			
Add			
, Remove			
3) Change		- 	
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Page 2 of 4

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If an ameadment provides for an 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)	or adding additional Articles, enter change(s) he onal sheets, if necessary). (Be specific)	
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	10/25/2017	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	0/25/2017	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendme sufficient for approval.	nt(s)
The amendment(s) was/were a must be separately provided f	pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	rment
	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareho	lder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
10/25/20 Dated	17	,
Signature	Man	
select	director, 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 conted fiduciary by that fiduciary)	n purt
	LIZI ROCHE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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