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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: MEI 803 CORP P09000058077 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ROBERT S. STEINBERG, ESQUIRE Name of Contact Person ROBERT S. STEINBERG P.A. Firm/ Company 15715 S DIXIE HWY, SUITE 226 Address PALMETTO BAY, FL 33157 City/ State and Zip Code RSS@STEINBERGTAXLAW.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ROBERT S. STEINBERG Name of Contact Person 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 Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

		RP.

P0900058077	Fioritia Dept. of State)	
(Document Number of Corporation	(if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment	
A. If amending name, enter the new name of the corporation: N/A	. The new	
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	15715 S DIXIE HWY	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	SUITE 226	
	PALMETTO BAY, FL 33157	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO BOX 25323	
•	CCS 400280	
	MIAMI, FL 33102	
D. If amending the registered agent and/or registered office ad	dress in Florida, enter the name of the	
new registered agent and/or the new registered office addre		
Name of New Registered Agent ROBERT S. S.	I EINBERG	
15715 S DIXIE	HWY, SUITE 226	
·	atreet address)	
New Registered Office Address: PALMETTO BA	, FIOITUA	
(Cit _y	y) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent hereby accept the appointment as registered agent Administration	nt. r 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	•
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>D, V</u>	VERONICA MACHADO	PO BOX 25323 CCS 400280 MIAMI, FL 33102
2) Change Add Remove		N/A · ·	
3) Change Add Remove		N/A	
4) Change Add Remove		N/A	
5) Change Add Remove		N/A	
6) Change Add Remove		N/A	

E. If amending or adding additional Article (attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	
	·
•	
F. If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A) N/A	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:

The date of each amendment(s) a	doption: MARCH 30, 2012
Effective date if applicable:	ARCH 30, 2012
<u>appicuse</u> .	(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 su	opted by the shareholders. The number of votes cast for the amendment(s) afficient 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} N/A	,
·)	(voting group)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated MARC	CH 30, 2012
(By a d	d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
	ALFONSO M VASQUEZ
	(Typed or printed name of person signing)
	PRESIDENT
•	(Title of person signing)