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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: April Latan DOCUMENT NUMBER: P1000000793		orp.		
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this ma	tter to the following:			
Renee Adwar, Esq.				
-	Name of Contact Person	n		
Renee Adwar, P.		-		
	Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
848 Brickell Aver	nue Suite 830			
	Address			
M'	Address			
<u>Miami, Fl 33131</u>				
-	City/ State and Zip Cod	e		
radwarpa@reneeadv	•			
E-mail address: (to be used for future annual report notification)				
Para Construction of the state				
For further information concerning this matter, please	se can.			
Renee Adwar	at (305	374-4422		
Name of Contact Person	Area Co	de & 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 & 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	Stroot	Address		
Amendment Section		Iment Section		
Division of Corporations	Division of Corporations			
P.O. Box 6327		Building		
Tallahassee, FL 32314	2661 E	xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

April Latam Assistance, Corp.		
(Name of Corporation as currently filed with the Fl	orida Dept. of State)	
P1000007931		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following	; amendment(s) to
A. If amending name, enter the new name of the corporation:		
Welcome Assist, Corp.		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must c	breviation
B. Enter new principal office address, if applicable:	11900 Biscayne Boulevard	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Suite 600	
	Miami , Florida 33181	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11900 Biscayne Boulevard	
	Suite 600	
	Miami, Florida 33181	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the	
Name of New Registered Agent N/A		
(Florida stre	et 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 w		SECRETARY SECRETARY SECRETARY SECRETARY
Signature of New Registered A	gent, if changing	* OF ST

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.

X Change	<u>PT</u> <u>Jo</u>	hn_Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	Illy Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u></u>	Philip Namiech	11900 Biscayne Boulevard
Add			Suite 600
Remove			Miami, Florida 33181
2) Change	P	Elodie Rambert	11900 Biscayne Boulevard
Add			Suite 600
Remove			Miami, Florida 33181
3) Change			
Add			*****
Remove			
4) Change			
Add			
Remove			
5) Change			
Add	-		
Remove			
6) Change			
Add			
Remove			

	lding additional Art sheets, if necessary).	(Be specific)			
/A					
 					
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					.
	_			 	
If an amendment	provides for an exc	hange, reclassific	ation, or cancella	tion of issued s	hares,
<u>provisions for i</u> n	nplementing the am	endment if not co	ntained in the am	<u>endment itself:</u>	
(if not applic	cable, indicate N/A)				
			· 		
 ′A					
/A					
/A					

The date of each amendment(s) ad date this document was signed.	option: February 18, 2014	, if other than the
Effective date if applicable:		
Effective date in applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved 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 i	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder	
Dated February	7 19, 2014	
Signature	glace V	
selected	rector, president or other officer – if directors of officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Renee Adwar, Esq.	
-	(Typed or printed name of person signing)	
	Incorporator	
-	(Title of person signing)	<u> </u>