## P10000007931

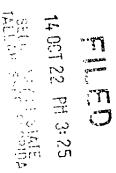
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: WELCOME	ASSIST, CORI	P	_
DOCUMENT NUMI	BER: P1000000793	1		_
	of Amendment and fee are su			140 1881
Please return all corre	spondence concerning this ma	tter to the following:		
	Renee Adwar, Es	sq.		The N
•		Name of Contact Person	n	
	Renee Adwar P.A		-	
		Firm/ Company		<u> </u>
	848 Brickell Aver	nue Suite 830		
	<del></del>	Address		<del></del>
	Miami Florida 33	131		
		City/ State and Zip Cod-	e	
rad	lwarpa@reneeadv	warna com		
- Tau		sed for future annual report	notification)	-
	2 man address. (10 be as	io intare unitan report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
Renee Adwa	r	at ( <u></u> 305	374-4422	
Name	of Contact Person		de & Daytime Telephone Nu	ımber
Enclosed is a check for	r the following amount made	payable to the Florida Depa	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)	
Amo Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

## **Articles of Amendment Articles of Incorporation**

## WELCOME ASSIST, CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

ent(s) to

P10000007931			0.5
(Document Numb	ber of Corporation (if known)		<u>~;</u>
cursuant to the provisions of section 607.1006, F as Articles of Incorporation:	Florida Statutes, this <i>Florida Pro</i>	ofit Corporation ado	pts the following
A. If amending name, enter the new name of	the corporation:		
name must be distinguishable and contain the "Corp.," "Inc" or Co.," or the designation "word "chartered," "professional association," o	'Corp," "Inc," or "Co". A pr		
3. Enter new principal office address, if appli	icable:		
Principal office address <u>MUST BE A STREET</u>	ADDRESS)		
Principal office address MUST BE A STREET  C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC			
C. Enter new mailing address, if applicable:	E BOX)	ida, enter the name	of the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC  D. If amending the registered agent and/or re	E BOX)		of the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC  D. If amending the registered agent and/or renew registered agent and/or the new registered	gistered office address in Flor		of the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC  D. If amending the registered agent and/or renew registered agent and/or the new registered	gistered office address in Flortered office address:		of the

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. Styles on Add

Mike Jones, V as Ren Example:	nove, and Sally Sm	ith, SV as an Add.	AS T
X Change	<u>PT</u> <u>John</u>	n Doe	TALLANDI
X Remove	<u>V</u> <u>Mik</u>	e Jones	22
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address 3: 26
1) Change	<u>P</u>	Elodie Rambert	11900 Biscayne Boulevard
Add			Miami Florida 33181
Remove			
2) Change	PCEC	Emmanuel Legras	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			

2. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	30 F
N/A	TAPET 22
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	3. 26 3. 26
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If an amendment provides for an exchange, reclassification, or cancellation of issupprovisions for implementing the amendment if not contained in the amendment	itself:
(if not applicable, indicate N/A)	
N/A	
	<del></del>

The date of each amendment	(s) adoption: September 22, 2014	, if other than th
date this document was signed	•	,
Effective date if applicable:	October 6, 2014	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	CT 22
by	(voting group)	10
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	D 3: 26
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated Sep	tember 20.	
Signature	Cons	
<u> </u>	y a director, president or other officer - if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
ар	opointed fiduciary by that fiduciary)	
	Renee Adwar, Esq.	
	(Typed or printed name of person signing)	
	Attorney in Fact/ Authorized Representative	
	(Title of person signing)	