P11000010695

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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DEC 14 2017 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI	on: Re	gis HR Grou	p4 Fnc.		
DOCUMENT NUMBER:		P110000 1	0495		
The enclosed Articles of Ai	nendment and fee are su	bmitted for filing.			
Please return all correspond	lence concerning this ma	tter to the following:			
	6	iselle Dei A	tmo		
		Name of Contact Person	n		
	Zumpano Castro, LLL Firm/ Company				
		Firm/ Company			
	500 S. DIXIE Highway #302				
<u> </u>	<i>C</i>	ora Gables City/ State and Zip Cod	F1 33144		
		City/ State and Zip Cod	e		
For further information con			umpano castro, com notification)		
6154	ella Dei Ama	at (305	\ 503-19aD		
Name of Co	ntact Person	at (Area Co	ode & Daytime Telephone Number		
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:		
S35 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			Address		
Amendment Section		Amendment Section			
	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building				
Tallahassee, FL 32314			Executive Center Circle		
		Tallah	assee, FL 32301		

Articles of Amendment to Articles of Incorporation

Red	713 HR Grou	PU, Fuc.		
(Name of Corpora	tion as currently filed	with the Florida Dept.	of State)	
	P11000	010695		
(Docu	ument Number of Corpo			
Pursuant to the provisions of section 607.1006, Floridits Articles of Incorporation:	da Statutes, this <i>Florida</i>	a Profit Corporation ado	pts the following a	mendment(s) to
A. If amending name, enter the new name of the	corporation:			
			TF	ie new
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Corword "chartered," "professional association," or the	rp," "Inc," or "Co".			
B. Enter new principal office address, if applicab (Principal office address MUST BE A STREET AD				
			The same	
			E 190	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	20V			员 濃
(Mutting unitess MAT BE AT UST OFFICE B	<u> </u>		(V.Fr	<u></u>
			Frank Land	一つ (後)
		· ·	The state of the s	
D. If amending the registered agent and/or regist new registered agent and/or the new registered		Florida, enter the name	of the	12
Name of New Registered Agent				
 .	(Florida street addı	ress)		
New Registered Office Address:			Florida	
Hew Registered Office Hauress.	(City)	· · · · · · · · · · · · · · · · · · ·	(Zip Coa	'e)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		d accept the obligations	of the position.	
, , , , , , , , , , , , , , , , , , , ,			F-2a	
				
Sig	gnature of New Register	ed 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	PT Joh	n Doc	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	ly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Sec	Carlos Saladrigas Jr.	
Add Remove			
2) Change Add	<u>Sec</u>	Lily Gutterrez	10625 N. Kendall Dr Hiami, Fl 33176
Remove 3) Change Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
If an amandment provides for an avok	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	name, recrassification, or cancenation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	- • •

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date))
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	endment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The followin must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	•
by	hareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharel action was not required.	nolder
Dated	
Dated	
(By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or officers have selected.	
appointed fiduciary by that fiduciary)	uner court
Carlos Saladrigus (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	