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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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## **COVER LETTER**

O: Amendment Section Division of Corporations	
IAME OF CORPORATION: Quality Insurance of South Florida, Inc.	
OCUMENT NUMBER: P11000016319	
he enclosed Articles of Amendment and fee are submitted for filing.	
lease return all correspondence concerning this matter to the following:	
Ernesto S. Medina, Attorney-at-Law Name of Contact Person	-
Firm/ Company	_
782 N.W. 42 Avenue, Suite 641	_
Miami, Florida 33126	
City/ State and Zip Code	-
emedina0653@yahoo.com	
E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
·	
Ernesto S. Medina, Atty-at-Law at (305) 260-0541	
Name of Contact Person Area Code & Daytime Telephone Number	er
inclosed is a check for the following amount made payable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)	
Mailing AddressStreet AddressAmendment SectionAmendment Section	

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

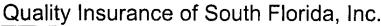
Tallahassee, FL 32314

P.O. Box 6327

## **Articles of Amendment** to

## **Articles of Incorporation**

TALLAHASSEE, FISHAMASSEE, FISHA



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

P11000016319

(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:

me must be distinguishable and con Corp.," "Inc.," or Co.," or the design	tain the word "corporati	on," "company," or "inco "Co". A professional corp	The properties of the pro
ord "chartered," "professional associa			name main con
Enter new principal office address,	if applicable:		
rincipal office address <u>MUST BE A S</u>	TREET ADDRESS )		
			<del></del>
Enter new mailing address, if appl			
(Mailing address <u>MAY BE A POST</u>	<u>OFFICE BOX</u> )		
			<del> </del>
If amending the registered agent ar	nd/or registered office add	lress in Florida, enter the n	ame of the
new registered agent and/or the ne			
Name of New Registered Agent	Ernesto S. Medi	na, Attorney-at-Lav	V
	782 N.W. 42	Ave., Ste. 641	<del>_</del>
		reet address)	<del></del>
New Registered Office Address:	Miami	. Flori	da 33126 (Zip Code)
	(City	,	(Zip Code)
<b>-</b>			
ew Registered Agent's Signature, if c			ons of the position
ew Registered Agent's Signature, if c nereby accept the appointment as regis			ons of the position.

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 Do	oc	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally St	mith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	Р	_	Elizabeth Perez	8724 S.W. 72 Street
Add				Miami, FL 33173
X Remove				
2) Change	Р		John D. Burns	8724 S.W. 72 Street
X				Miami, FL 33173
Remove				
3) Change				_
Add				
Remove				<del> </del>
4) Change				
Add				
Remove				
5) Change				
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
6) Change				
Add		_		
Add				
Kemove				

Attach additional sheets, if necessary)	ticles, enter change (Be specific)			
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If an amendment provides for an ex	change, reclassifica	tion, or cancellatio	n of issued shares,	
provisions for implementing the an (if not applicable, indicate N/A)	endment if not con	tained in the amen	dment itself:	
(i) not approacte, thateans (iii)				
			Water the second	
		· ··· ·		
	<del>.</del>			

The date of each amendment(s) adoption: January 8, 2013
Effective date if applicable: January 8, 2013
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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"  (voting group)
(voting group)
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated January 8, 2013
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed liduciary by that fiduciary)
John D. Burns
(Typed or printed name of person signing)
President
(Title of person signing)