P11000068924

| (Requesto | or's Name) |
|----------------------------------|------------------------|
| (Address) | |
| (Address) | |
| (City/State | e/Zip/Phone #) |
| PICK-UP | WAIT MAIL |
| (Business | Entity Name) |
| (Documer | nt Number) |
| Certified Copies | Certificates of Status |
| Special Instructions to Filing (| Officer: |
| • | : |
| | |
| | |
| | |

Office Use Only



300239523253

09/14/12--01003--030 **35.00

12 SEP 27 PM 2: 41

SECRETARY OF STATE

Amend

SEP 2 8 2012 T. BROWN

COVER LETTER

| TO: Amendment Section Division of Corporations | Choice Corn |
|--|--|
| | t Choice Corp |
| name of corporat po(1:1 <u>00006892</u> | 4 |
| DOCUMENT NUMBER: | |
| The enclosed Articles of Amendment and fee are submi | itted for filing. |
| Please return all correspondence concerning this matter | to the following: |
| Ramon de Jesus | Hernandez |
| America 1st Cho | Name o Contact Person |
| 6923 NW 77 Ave | Firm/ Company |
| Miami, FI/ 33166 | Address |
| (| City/ State and Zip Code |
| administration@ame | ericafirstchoice.com |
| | for future annual report notification) |
| For further information concerning this matter, please c | all: |
| Ramon de Jesus Hernandez | z at (786) 445-2200 |
| Name of Contact Person | Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount made pay | able to the Florida Department of State: |
| \$35 Filing Fee \$Certificate of Status | \$43.75 Filing Fee & Status Certified Copy Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |



September 18, 2012

RAMON DE JESUS HERNANDEZ AMERICA 1ST CHOICE CORP. 6923 NW 77 AVE MIAMI, FL 33166

SUBJECT: AMERICA 1ST CHOICE CORP.

Ref. Number: P11000068924

We have received your document for AMERICA 1ST CHOICE CORP. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

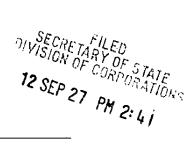
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Teresa Brown Regulatory Specialist II

Letter Number: 812A00023411

Articles of Amendment to Articles of Incorporation of



America 1st Choice Corp.

| (Document Number | r of Corporation (if known) | | | |
|---|--|--|------------------------------------|--------------------------|
| tursuant to the provisions of section 607.1006, Flo.s Articles of Incorporation: | rida Statutes, this <i>Florida I</i> | <i>Profit Corporation</i> ado | pts the following | ; amendmen |
| . If amending name, enter the new name of the | e corporation: | | | |
| | | | | The new |
| ame must be distinguishable and contain the v "Corp.," "Inc.," or Co.," or the designation "Co vord "chartered," "professional association," or | orp," "Inc," or "Co". A | pany," or "incorpor professional corporat | ated" or the ab ion name must c | breviation ontain the |
| B. <u>Enter new principal office address, if applica</u> Principal office address <u>MUST BE A STREET A</u> | (DDRESS) | | | |
| | | | · · · | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | <i>BOX</i>) | | | |
| | | | | |
| D. If amending the registered agent and/or reginew registered agent and/or the new register | stered office address in Fl red office address: | orida, enter the name | e of the | |
| Name of New Registered Agent | | | | |
| · | (Florida street addres | <i>s)</i> | | |
| New Registered Office Address: | (City) | , Florida | (Zip Code) | |
| | V - V | | , | |
| New Registered Agent's Signature, if changing | Registered Agent: nt. I am familiar with and | | | |

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change | <u>PT</u> <u>John</u> | <u>1 Doe</u> | |
|--|-----------------------|-----------------|--|
| X Remove | <u>V</u> <u>Mik</u> | e Jones | |
| X Add | <u>SV</u> <u>Sali</u> | y Smith | |
| Type of Action (Check One) Change Add | VP | Raudel Rivera | Address 9595 Fountaine blue Blvd 1405 Miami, Fl. 33172 |
| Remove 2)Change, XAdd | VP | Orlando Antunez | 7763 NW 200 Ln Hialeah, Fl. 33015 |
| Remove 3)Change XAdd | <u>VP</u> | Julio Villegas | 6430 SW 43 St Miami, Fl. 33155 |
| 4) Change Add Remove | | | |
| 5) Change Add Remove | | | |
| 6) Change Add | | | |

| ttach additional sheets, if necessary). | cles, enter change(s) (Be specific) | | | |
|--|-------------------------------------|--------------------|-------------------|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| · | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | • |
| an amendment provides for an exc | ange, reclassificatio | n, or cancellation | of issued shares, | |
| orovisions for implementing the amo (if not applicable, indicate N/A) | ndment if not conta | ined in the amend | ment itself: | |
| (ij noi appricaore, maicaie 1971) | | | | |
| | | | • | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | <u> </u> | | | |
| | | | | |
| | | | | |

9/5/2012 The date of each amendment(s) adoption: _ Effective date if applicable: (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 (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} 9/05/2012 Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator – if in the hapts of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Ramon de Jesus (Typed or printed nant President (Title of person signing