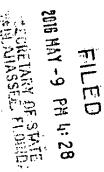
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: MIAMI COMMUN	NITY HEALTH CENTER I	NC
DOCUMENT NUMB	ER: P11000098221		
The enclosed Articles of	<i>f Amendment</i> and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
j	OSE RODRIGUEZ		
-		Name of Contact Person	
1	MIAMI COMMUNITY HEA	ALTH CENTER INC	
-		Firm/ Company	
\$	891-893 EAST 10TH AVE		
-		Address	
1	HIALEAH FL 33010		
-		City/ State and Zip Code	2
JOP11	09@YAHOO.ES		
		sed for future annual report	notification)
	·	•	,
For further information	concerning this matter, pleas	se call:	
JOSE RODRIGUEZ		at (⁷⁸⁶⁻	468-6324
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	ER, INC		
(Name o	f Corporation as currently filed with the	Florida Dept. of State)	
P11000098221			
	(Document Number of Corporation (i	f known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit	Corporation adopts the following	amendment(s) t
A. If amending name, enter the new na	me of the corporation:		
		,	The new
	tain the word "corporation," "company, ation "Corp," "Inc," or "Co". A profestion," or the abbreviation "P.A."	" or "incorporated" or the abl	breviation .
B. <u>Enter new principal office address, i</u> Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST (</u>		ACE TAR	2016 FAY -9
D. <u>If amending the registered agent an</u> new registered agent and/or the nev	d/or registered office address in Florida, v registered office address:	enter the name of the	PH 4: 28
Name of New Registered Agent		•	
	891-893 EAST 10TH AVE		
	(Florida street address)	 -	
New Registered Office Address:	HIALEAH	, Florida 33010	
	(City)		

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	VP	MAIRIM GONZALEZ	891-893 EAST 10TH AVE
Add X Remove			HIALEAH FL 33010
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pem ove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	mending or adding additional Arti ach additional sheets, if necessary).	(Be specific)
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rovisions for implementing the amendment if not contained in the amendment itself:	an amendment provides for an exc	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	rovisions for implementing the am	endment if not contained in the amendment itself:
	(if not applicable, indicate N/A)	
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•	04/20/2016	
	adoption:	, if other than the
date this document was signed.	20/2016	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date widepartment of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were as action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
04/20/201	16	
Dated		
Signature X	precion president or other officer – if directors or officers have not been	
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court	
	inted fiduciary by that fiduciary)	
	JOSE RODRIGUEZ	
1		
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	