P.12000036050

(Re	equestor's Name)	·
(Ad	ldress)	
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OINISION OF COMPORATIONS

FEB - 3 2016 C MCNAIR

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: Regis HR Group 3, Frc.						
DOCUMENT NUMBER: P12 00003405 0						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Giselle Del Amo Name of Contact Person						
Zumpaun : Castro 110						
Zumpano Castro, LLC Firm/Company						
500 S. Dixie Highway #302						
Coral Gabes, Fl 33146 City/ State and Zip Code						
City/ State and Zip Code						
giselle.ortizdelamod zvmpanocastro. Com E-mail address: (to be used for future annual report notification)						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
GISEILE DEL AMO at 305 503 2990 Name of Contact Person Area Code & Daytime Telephone Number						
Name of Contact Person Area Code & Daytime Telephone Number						
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)						
Malling AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301						

Articles of Amendment to Articles of Incorporation of

16 TO THE STATE OF THE STATE OF

	(2 m/s)
Regis HR Grap 3, Fnc	> 24.9°
(Name of Corporation as currently filed with the Florida Dept. of State)	5: 00
P12000036050	6.
(Document Number of Corporation (if known)	° 0
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the followits Articles of Incorporation: A. If amending name, enter the new name of the corporation:	wing amendment(s) to
	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name mu word "chartered," "professional association," or the abbreviation "P.A."	

(* *	incipal office address <u>most be Astreet Address</u>)		
	Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
D.	If amending the registered agent and/or registered office address: Name of New Registered Agent	ss in Florida, enter the name of the	

(Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

B. Enter new principal office address, if applicable:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered 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	<u>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	TS	- .	Arnold Ledesma	10625 N. rendall Dr.
Add	•			miami, Fl 33176
Remove				
2)Change	IIZ	_	Carlos Saladrigas Jr.	jours N. Kendall Dr.
Add				miami, F1 33176
Remove				
3) Change		-		
Add				
Remove				
4) Change	-	_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach <i>addi</i>	g or adding additional tional sheets, if necessar	ry). (Be specific)				
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an amendr provisions f (if not a	ment provides for an ex for implementing the a applicable, indicate N/A)	xchangé, reclassifi mendment if not é	cation, or cancells ontained in the an	ation of issued sh nendment itself:	<u>āres,</u> .	

·						

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date w document's effective date on the Department of State's records.	ill 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 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)	
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 1127114 Signature M M M	
(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 fiduciary by that fiduciary)	_
Carlos Saladianas la	
(Typed or printed name of person signing)	
President	
(Title of person signing)	