(Re	questor's Name)	
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

Consuland Genoup Inc NAME OF CORPORATION: P12000042519 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: David L. Fernandez
Name of Contact Person PMEB Consolvering Group Inc

Firm/Company

4229 Baling for Dr.

Address

VAlueD, 76 33594 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Avid L funandéz at (813) (75-4825)

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

,to · Articles of Incorporation of

PMEB Consulring Group Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P120006 42519	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendatis Articles of Incorporation:	ment(s) to
A. If amending name, enter the new name of the corporation:	
The $n$	ew
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviati "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain tword "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
New Registered Agent's Signature, if changing Registered Agent:  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	
EE T	

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11 HAY 29 P 2: 37

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 John	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sally	/ Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	<u>P</u> _	Jose S. Fernandz	4229 Balungten Dis Valanco, 72 33594
2) Change Add Remove	VP	David Fernandez	4229 Balungton DR VALRICO FL 33594
3) Change Add Remove	<u>P</u>	DAVID Fernandez	YZZG Balmighn DZZ VALPICO FL 33594
4)Change Add Remove	<u>VP</u>	Jose J. Fernandez	4229 Balington Die VATALCO, 76 32194
5) Change Add Remove			
6) Change Add Remove			

amending or adding additional Arti- ttach additional sheets, if necessary).	(Be specific)	<del></del> -		
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		11.47	.c	_
an amendment provides for an exchorovisions for implementing the ame	ange, reciassification. adment if not contain	<u>, or cancenation o</u> ed in the amend <u>r</u>	<u>r issueu snares</u> ient itself:	<u>S</u> 4
(if not applicable, indicate N/A)	<del></del> ,		- <del></del> -	

The date of each amendment(s) adoption:		
Effective date if applicable:	May 22, 20/2 (no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
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.	
	oproved 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	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were accarding was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated	May 22, 2012	
	May 22, 2012	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	•	
	President	
	(Title of person signing)	