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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORF USA

Account Number: 072450003255

: (305)634-3694

Fax Number

: (305)633-9696

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## COR AMND/RESTATE/CORRECT OR O/D RESIGN VICUM CONSULTING GROUP CORP

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7.

CORP USA



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COVERCETTER				
TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: Vicum Consulting Group Corp				
DOCUMENT NUMBER: P12000084936				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Max A. Asiams ESQ Name of Contact Person				
Medican Fem				
Firm/ Company				
325 almora avenue				
Pord Gabler, Blow, DA 33134				
City/ State and Zip Code				
angie @ the medilawform. com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Angela H. Perez at 305 444-3 484  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:				
S35 Filing Fee				

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

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(Name of Corporation as sucreptly filed with the Pierid	·	2
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(Document Number of Corporation (if kno	wn)	<u> </u>
, ,		•
Pursuant to the provisions of section 607.1006, Florida Stamues, this Florida Articles of Incorporation:	de Profit Corporution adopts the	e following amendment(s) to
·		
A. If amending name, enter the new name of the corporations	İ	
		The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co".	company, " or "incorporated"	or the abbreviation
word "chartered," "professional association," or the abbreviation "P.A."	y projessional carporation na	me must contain the
	1	Con Charles A
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	325 almena	
<u> </u>	Bora Gastes	F_33134
	_	•
<u> </u>		
C. Buter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as	Principal
		11.15
<del>-</del>		
	<u> </u>	
The life and a district and the major and a major and the second and the second as a secon		
D. If amending the registered agent and/or registered office address to new registered agent and/or the new registered office address:		-
Name of New Registered Agent Law Offices	of Man A. AD	oms, Esq. PLLC
		···· • • • • • • • • • • • • • • • • •
	ena avenue	
(Florida'street an		. •
New Hexistered Office Address: Coral Gat	Fiorial	
(City)	(ZLIp	Code)
New Registered Agent's Signature, if changing Registered Agent;		
I hereby accept the appointment as regretered agent. I am familiar with a	nd accept the obligations of the t	position.
71/0000	•	
	<del>-  -</del>	

Page 1 of 4

address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Please note the afficer/director title by the first letter of the affice 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 officer hald. President, Treasurar, 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: PT John Doc X Change X Remove Y Mike Jones X Add ŠΥ Saily Smith Title Address <u>Name</u> Type of Action (Check One) Change Remove Change Remove Change Remova Change Add Remove Change Add Remove Change

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

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Page 2 of 4

Add

Remove

amending or adding additional Art tach udditional sheats, if necessary).	(Bu specific)
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ovisions for implementing the was	hange, reclassification, or encellation of issued shares, andment if not contained in the amendment itself:
(if not applicable, indicate N/A)	marghent of Nor Collection at the Strengelett (1761):
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Page 3 of 4

The data of each amendment(s) adoption this document was signed.	ption: 11/5/14	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	<del>_</del>
	(no more inan 20 cays after amendment frio using	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.	
	wed by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amondment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	ted by the board of directors without shareholder action and shareholder and by the incorporators without shareholder action and shareholder	
Dated 04	1/11/14	
Signature	They	<del></del>
(By a dire	by an incorporator — if in the hands of a receiver, trustee, or other court	
	d fiduciary by that fiduciary)	
_	Cesar Augusto tellez	······
	(Typed or printed name of person signing)	
	RESI Long	
<del>-</del>	(Title of nemon gioning)	