Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000078545 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC

Account Number: I2000000146

: (305)444-4994

Fax Number

: (305)444-4977

**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

GREAT PROFESSIONAL CENTER INC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
| Estimated Charge | \$35.00 |

P. 002/005

Articles of Amendment to Articles of Incorporation

GREAT PROFESSIONAL CENTER INC

(Name of Corporation as currently filed with the Florida Dept. of State)
P13000014023

(Document Number of Corporation (if known)

A. If amending name, enter the new name of the corporation:

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

| . Enter new principal office address | ition," or the abbreviation "P | 1140 W 50 ST # 402 |
|--|--|---------------------------------------|
| incipal office address <u>MUST BE A.</u> | | HIALEAH, FL 33012 |
| Enter new malling address, if app Malling address <u>MAYBE A POST</u> | | 1140 W 50 ST # 402 |
| TOWNS WOULDS WATE DESTRICTED | | HIALEAH,FL 33012 |
| If amending the registered agent a new registered agent and/or the ne | w registered office address: | ess in Florida, enter the name of the |
| | DANIA CHAVEZ 1140 W 50 ST# | ess in Florida, enter the name of the |
| new registered agent and/or the ne | DANIA CHAVEZ 1140 W 50 ST # (Florida streen) | ess in Florida, enter the name of the |

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.

| X Change | PT | John Doe | |
|-------------------------------|--------------|-----------------|---------------------|
| X Remove | <u>Y</u> | Mike Jones | |
| _X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | Р | GERALDINE BAZAN | 2407 SEABREEZE COUF |
| Add | | | ORLANDO, FL 32805. |
| Remove | | | |
| 2) Change | P | DANIA CHAVEZ | 1140 W 50 ST # 402 |
| Add | | | HIALEAH,FL 33012 |
| Remove | | | |
| 3) Change | | 499, | |
| Add | | • | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | - | • |
| Remove | | | |
| G Change | | | |
| 6) Change | | - | |
| Remove | | | |
| F Kemuve | | | |

| Attach additiona | adding additional Art of sheets, if necessary). | (Be specific) | | | |
|--|--|--|--|--|---|
| - | · | | | | , |
| | | | | | |
| | | | | | |
| | | | | | · · · |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | • | |
| | | <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u> | | | ····· • · · · · · · · · · · · · · · · · |
| | | | | | |
| *************************************** | | | | | |
| | | | | | |
| f an amendmen provisions for is (if not applic | t provides for an exch mplementing the amer cable, indicate N/A) | ange, reclassific adment if not co | ation, or cancell ntained in the an | ntion of issued shar nendment itself: | <u>es,</u> |
| | | | | | • |
| | | | | ••• | |
| | | | | | |
| | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | |
| | | | | | |

| The date of each amendment(s) adoption: 3/31/14 | , if other than the |
|--|---------------------|
| date this document was signed. | |
| Effective date if applicable: 3/31/14 | |
| (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 antitled 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(a) 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 was not required. | |
| Dated 3/31/14 | |
| Signature D | |
| (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) | |
| GERALDINE BAZAN | |
| (Typed or printed name of person signing) | _ |
| PRESIDENT | |
| (Title of person signing) | |