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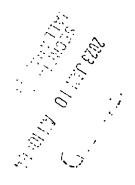
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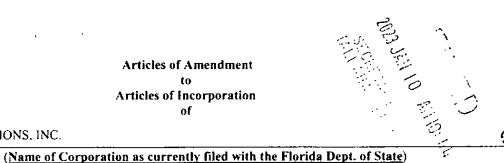
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MEDICARE SIMI	PLY SOLUTIONS, INC.		
	BER: P13000080480			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corre	spondence concerning this ma	tter to the following:		
	MARCOS A GARCIA			
	· · · · ·	Name of Contact Person	1	
		Firm/ Company		
	13428 SW 68TH TERRACE			
		Address		
	MIAMI, FI. 33183			
		City/ State and Zip Cod	e	
	qansins@comeast.net			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
MARCOS A GARCI	Α	at (786	853-2250	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	iling Address endment Section		Address Iment Section	
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



MEDICARE SIMPLY SOLUTIONS, INC.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

P13000080480	
(Document Number	nber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporatio	on:
MED-CARE SIMPLY SOLUTIONS, INC.	The new
name must be distinguishable and contain the word "corporation" lnc.," or Co.," or the designation "Corp," "lnc," or "Co" chartered," "professional association," or the abbreviation "I	on," "company," or "incorporated" or the abbreviation "Corp.," o". A professional corporation name must contain the word 'P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 new registered agent and/or the new registered office add	
Name of New Registered Agent	
(Flori	rida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fami	
Signature of N	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)

Example:

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	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		_	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			-14
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific) If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
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provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
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	-

The date of each amendment(s)	adontion: 01/01/2023	, if other than the
date this document was signed.		
Effective date if applicable: 01	/01/2023	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendn sufficient for approval.	nent(s)
	oproved by the shareholders through voting groups. The following steer each voting group entitled to vote separately on the amendment(s):	utement
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by ALL SHAREHHOL	DERS	
	(voting group)	
Dated 01/01/202	23	
select	director, president or other officer – if directors or officers have not beed, by an incorporator – if in the hands of a receiver, trustee, or other nted fiduciary by that fiduciary)	
	MARCOS A GARCIA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	