Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

: CUEVAS & ORTIZ, P.A. Account Name

Account Number : I20030000123 : (305) 461-9500

Fax Number : (305)448-7300

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COR AMND/RESTATE/CORRECT OR O/D RESIGN HC GROUP HOLDINGS, INC.

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COVER LETTER

TO: Amendment Section Division of Corpor			
NAME OF CORPORA	ATION: HC GROU	P HOLDINGS, II	NC.
	ER. P1400004279		
	f Amendment and fee are su		
Please return all corresp	ondence concerning this ma	ter to the following:	
<u>/</u>	ANDREW CUEV	AS, ESQ.	
		Name of Contact Person	1
(CUEVAS & ASSO	OCIATES, P.A.	
-	, ,	Firm/ Company	
- !	7480 SW 40TH S	TREET	
_		Address	
1	MIAMI, FL 33155		
_		City/ State and Zip Code	•
acue	evas@cuevaslaw	r.com	
	_	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Andrew Cueva	· '	at (305	461-9500
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	riment 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)
	ng Address		Address
	dment Section		ment Section
	ion of Corporations Box 6327		n of Corporations Building
	1255ee, FL 32314		xecutive Center Circle
,	•		issee, FL 32301

No. 0432 P. 3/6 FILED SECRETARY OF STATE TALL TO DEFORM TAIL

Articles of Amendment to Articles of Incorporation of

14 AUG 13 PH12: 38

HC GROUP HOLDINGS,	INC.		
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)	
P14000042792			
(Document	Number of Corporation (if l	known)	_
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this Fi	lorida Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name N/A	ne of the corporation:		The new
	tion "Corp," "Inc," or "Co	" "company," or "incorporated" or the o". A professional corporation name mus. A."	abbreviation
B. Enter new principal office address, if	fannlischler	N/A	
(Principal office address MUST BE A ST			_
			-
			
C. Enter new mailing address, if applic		N/A	
(Mailing address MAY BE A POST O	FFICE BOX)		_
			_
			<u> </u>
D. If amending the registered agent and		ss in Florida, enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent	N/A		
	<u> </u>		
	(Florida stree	it address)	
New Registered Office Address:	(City)	, Florida (Zip Code)	-
	(Chyy	(esp code)	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	anging Registered Agent: red agent. I am familiar wi	th and accept the obligations of the position	t
Sia	nature of New Registered Ag	rent if changing	
~.6.		1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	

'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	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	INCORVAIA, CARLOS	2501 NW 37 STREET
Add			MIAMI, FL 33142
Remove			
2) Change	ST	INCORVAIA, FILIPPO	2501 NW 37 STREET
Add			MIAMI, FL 33142
Remove			
3) Change	ST	INCORVAIA JR., FILIPPO	2501 NW 37 STREET
✓ Add			MIAMI, FL 33142
Remove			.
4) Change	Р	INCORVAIA SR., FILIPPO	2601 NW 37 STREET
Add			MIAMI, FL 33142
Remove			
5) Change			
Add			
Remove			,
6) Change			
Add			
Remove			

an amendment provides for an exchange, reclassification, or cancellation of issued shares, revisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	<u>lf amending or adding additional Arti</u> Attach <i>additional sheets, if necessary).</i>	(Be specific)
rovisions 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 amer	adment if not contained in the amendment itself:
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The date of each amendment(s) adoption: AUGUST 12, 2014	, if other than the
date this document was signed.	
Effective date if applicable:	
(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 entitled to vote separately on the amendment(s):	
'The number of votes east 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 AUGUST 12, 2014	
Signature Tifger -	
(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)	
FILIPPO INCORVAIA JR.	
(Typed or printed name of person signing)	_
SECRETARY	
(Title of person signing)	