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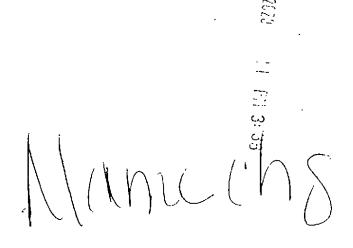
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: TOWN DRIVER I	NC.	
DOCUMENT NUM	BER: P16000057829	·	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	VIVIANA P. JARAMILLO		
		Name of Contact Persor	1
		Firm/ Company	
	355 NW 41ST WAY		
		Address	
	DEERFIELD BEACH / FLO	RIDA 33442	
		City/ State and Zip Code	2
	vivianaj.urs@gamil.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
VIVIANA P. JARAMILLO		at (304-5576
Name of Contact Person		at (954) 304-5576 Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

TOWN DRIVER INC.		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
116000057829		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the foll	owing amendment(s) to
A. If amending name, enter the new name of the corporation:		
UTILIZATION REVIEW SOLUTIONS INC.		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must co	viation "Corp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	727
(mailing duaress <u>MAT BE A FOST OF FICE BOA</u>)	11/11/	
		Pil
		
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address		පි
Name of New Registered Agent NA		<u>.</u>
(Florida s	street address)	
6/ A	Florida	
New Registered Office Address: N/A	. 1 10/1/44	(Zip Code)

Check if applicable

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

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 = Chairmon 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: <u>X</u> Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change			/ -	
Add				
Remove			_	
2) Change				
Add		4 1	-	
Remove Change			<i>-</i> 	
Add				
Remove		t/\		
4) Change		- /		
Add			-	
Remove				
5) Change		_/		
Add	/		-	
Remove			_	
6) Change	/			
Add /	/		_	
Remove				

If amending or adding additional Articl (Attach additional sheets, if necessary).	les, enter change(s) here: (Re specific)
угтали авинонки знесья, у несезяту).	по просус
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	<u> </u>
/	
If an amendment provides for an excha	nge reclassification, or cancellation of issued shares.
provisions for implementing the amend	inge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) a	idoption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file da	
	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory tiling requiremed epartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without share	cholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes cast for the a ufficient for approval.	mendment(s)
	proved by the shareholders through voting groups. The follow reach voting group entitled to vote separately on the amendm	
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/03/20		
Dated		
Signature	Millian .	
(By a c select	lirector, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, onted fiduciary by that fiduciary)	
	JEFFREY A WILLIAMS	
	(Typed or printed name of person signing)	
	EXECUTIVE SECRETARY	
	(Title of person signing)	