P16000073917

Office Use Only



300293035313

300293035313 12/16/16--01026--006 **35.00

2016 DEC 16 AM 11: 2

SECRETARY OF STATE

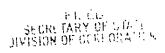
DEC 1 9 2016 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CASA MONDRAGONE, INC						
DOCUMENT NUMBER: P16000073917						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
H Wayne Hayes, Jr.						
	Name of Contact Person					
PatientTrac Corporation						
·	Firm/ Company					
975 Arthur Godfrey Road, St	, , , ,					
	Address					
Miami Beach, Florida 33140						
Widni Beach, 11011da 55110	City/ State and Zip Code					
	City/ State and Zip Code					
wayne@patienttrac.com						
E-mail address: (to be us	sed for future annual report notification)					
For further information concerning this matter, please call:						
H Wayne Hayes, Jr	at (305 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 S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
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					

Articles of Amendment to Articles of Incorporation of



2016 DEC 16 AM 11: 22

(Name	of Corporation as curren	tly filed with the Florida Dept. of State)
P16000073917		
,	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation:	
		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, (Principal office address <u>MUST BE</u> A S		
		
C. Enter new mailing address, if appl (Mailing address <u>MAY BE A POST</u>		
	,	
		
 If amending the registered agent as new registered agent and/or the ne 		dress in Florida, enter the name of the ss:
	PatientTrac Corporation	<u></u>
Name of New Registered Agent	975 Arthur Godfrey Roa	d Suite 401
		street address)
V 5	Miami Beach	33140
New Registered Office Address:	·	, Florida (Zip Code)
New Registered Agent's Signature, if c		
i nereny accept the appointment as regis	terea agent 1 am jamiliai	r with and accept the obligations of the position.
	Signature of 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)

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Salvatore Matuozzo	620 NE 78th Street
Add			Miami, Florida 33138
X Remove			
2) Change	S	H WAYNE Hyzu Ta	# 401 M. Ami GOACH, F/A 33190
Add			E 401
Remove			11. Am, 6GACH, F/A 3519C
3) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	· ·

The date of each amendment(s) adoption:	r v if	other than the
date this document was signed.	D 1 1 2017	SECRETARY DIVISION OF CO	OF STATE REORATOS
Effective date if applicable:	December 1, 2016		
	(no more than 90 days after amendment file date)	2016 DEC 16	AH 11: 22
	his block does not meet the applicable statutory filing requirements, e Department of State's records.	this date will not b	pe listed as the
Adoption of Amendment(s)	(CHECK ONE)		
☐ The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendre sufficient for approval.	dment(s)	
	e approved by the shareholders through voting groups. The following d for each voting group entitled to vote separately on the amendment(
"The number of votes	cast for the amendment(s) was/were sufficient for approval		
by			
·	(voting group)		
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and sha	reholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareho	lder	
Decem Dated	ber 15, 2016		
sel	y a director. president or other officer—if directors or officers have no ected, by an incorporator—if in the hands of a receiver, trustee, or oth pointed fiduciary by that fiduciary) H Wayne Hayes/Jr. (Typed or printed name of person signing)		
	President/Director		
	(Title of person signing)		