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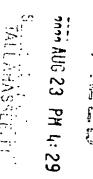
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COVER LETTER

*TO: Amendment Section Division of Corporations

NAME OF CORPORATION: JCC Quality Services, INC.
DOCUMENT NUMBER: P17000004233
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kiara R. Nernandez-Genzalez Name of Contact Person
Kaba Consulting Inc.
171011 FL 50 SLITE 303 Address
Address
Clermont FU 34711 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KICICA R. Nemandez Genzalez at (352), 243 - EALCO Name of Contact Person 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:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & S43.75 Filing Fee & Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

JUC Manty Services, INC. 2022 AUG 23 PM 4: 29 (Name of Corporation as currently filed with the Florida Dept. of State) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent _ (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s, 607,0120 (11) (e), F.S.

If amending the Officers address of each Officers (Attach additional sheets, Please note the officer/dir P = President; V = Vice to Executive Officer; CFO = President, Treasurer, Dir Changes should be noted a change, Mike Jones leat Mike Jones, V as Remove Example: X Change	and/or D if necess rector titl President Chief Fi ector wot in the for	Director being add sary) le by the first letter t; T= Treasurer; S inancial Officer. I, uld be PTD. llowing manner. O orporation, Sally S	led: of the office ti i= Secretary (! f an officer/dire Currently John Smith is named	tle: D= Director;}TR vctor holds more Doe is listed as i	= Trustee; C than one title, the PST and N	= Chairman or list the first lett Mike Jones is lis	Clerk; CEO = er of each offic ted as the V. I	= Chief ce held There is
X Remove	$\underline{\mathbf{v}}$	Mike Jones						
X Add	<u>sv</u>	Sally Smith						
Type of Action (Check One)	<u>Title</u>	<u>Name</u>			<u>Addres</u>	<u>\$</u> 8		
1) Change	_D_	<u>FICE</u>	<u>igarita</u>	Angulo:	·Ceja	252 Winter (E Mapli Sarden	e St FL 3
Remove 2) Change								
Add								
Remove Change								
Add						·		
Remove								
4) Change								
Add								
Remove								
5) Change								

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6) ____ Change

____ Add

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(Ațțac	ending or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
If an	mendment provides for an exchange, reclassification, or cancellation of issued shares,
prov	sions for implementing the amendment if not contained in the amendment itself:
ļ	if not applicable, indicate N/A)
<u> </u>	

•

The date of each amendment(s) addate this document was signed.	loption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after a	
	(no more than 90 days after a	imenament file date)
Note: If the date inserted in this b document's effective date on the De		y filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	opted by the incorporators, or board of direc	ctors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of vificient for approval.	rotes cast for the amendment(s)
	proved by the shareholders through voting a each voting group entitled to vote separate	
"The number of votes cast	for the amendment(s) was/were sufficient (for approval
by	(voting group)	
	(voting group)	-
Dated	116 1 2022 mill	
Signature/	MIL	
(Byzá'di selectec	rector, president or other officer – if direct I, by an incorporator – if in the hands of a r ed fiduciary by that fiduciary)	
	TOSE C CORNET(on signing)
	PRESIDENT	
	(Title of person signing)	

2022 AUG 23 PM 4: 29