## P17000017677

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SEURITARY OF STATE SOLVISION OF CORPORATIONS
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: AMY'S ANGEL N	ON-EMERGENCY MEDI	CAL TRANSPORT INC		
DOCUMENT NUME	P17000017677				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	FEDERICO G SOTIL				
		Name of Contact Person	1		
	AMY'S ANGEL NON-EMERGENCY MEDICAL TRANSPORT INC				
		Firm/ Company			
	5302 GRAND CYPRESS CI	R APT 204			
		Address			
	NAPLES, FL 34109				
		City/ State and Zip Code	e .		
CGPS	SSERVICES@AOL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
FEDERICO G SOTIL		at (407	de & Daytime Telephone Number		
Name (	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check fo	r 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)	□\$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 Articles of Incorporation of

AMY'S ANGEL NON-EMERGENCY	MEDICAL TRANSPORT	INC	
( <u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)	A MARION
P17000017677			易
	(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 follow	ving amending
A. If amending name, enter the new n	ame of the corporation:		
N/A	<del></del> -		The second
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	on," "company," or "incorporated" or the "Co". A professional corporation name mus "P.A."	The new abbreviation st contain the
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	<del></del>
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	OFFICE BOX	N/A	
D. If amending the registered agent ar new registered agent and/or the ne			
Name of New Registered Agent	SOTIL, FEDERICO G	_	
Nume of New Negaserea rigem	5302 GRAND CYORES	S CIR APT 204	
	(Florida s	treet address)	_
New Registered Office Address:	NAPLES	. Florida 34109	
New Registerea Office Address.			p Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		<b>t:</b> with and accept the obligations of the position	ı.
	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>	<u>Name</u>	<u>Addres</u> s		
1) X Change	<i>P</i>	FEDERICO G. SOTIL	5302 GRAND CYPRESS CIR		
Add			NAPLES, FL 34109		
Remove					
2) Change					
Add					
Remove					
3 ) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6)Change					
Add					
Remove					

ttach additional	sheets, if necessary).	(Be specific)				
		<del> </del>				
			<del></del>			
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				_		
						<del></del> -
f an amendment	provides for an exc	hange, reclassif	ication, or cance	ellation of issued	shares,	
provisions for in if not applic	nplementing the amable, indicate N/A)	enament II not (	contained in the	amendment itsei	<u>1;</u>	
(9	,					
			<del></del>			
····						
					<del></del> -	

	03/08/2017	
The date of each amendment(s) a date this document was signed.	idoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we epartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
03/08/201	7	
Dated	<b>1</b> .	
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	FEDERICO G SOTIL	
	(Typed or printed name of person signing)	<del></del>
	PRESIDENT	
	(Title of person signing)	