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(Ci	ty/State/Zip/Phone	e #)	
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(Document Number)			
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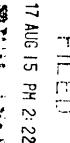
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COVER LETTER

TO: Amendment Section

Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$52.50 Filing Fee ☐\$43.75 Filing Fee & □S43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address

> Amendment Section Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Amendment Section

Clifton Building

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

FILED

Articles of Amendment

to

Articles of Incorporation of

17 AUG 15 PM 2: 22

One Family of	alair compatible of the same
(Name of Corporation as currently filed with the Flo	prida Bent of State
P17000041418	2
(Document Number of Corporation (if	known)
·	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	floridu Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Coword "chartered," "professional association," or the abbreviation "F	Co". A professional corporation name must contain the
	1840 W 49 ST
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Suite 509
	th'aleah, IL 33012
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1840 W 49 ST
	thaleah, 12 3302
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent TUAN He	amnez
1B410 W 46	1.5+ +509
(Florida stree	et address)
New Registered Office Address: That law	1
(Civ)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	ith find accept the obligations of the position.
Signature of New Registered As	gent, 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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Saily Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
Change	P TOrres, Notando	2525 Ponce Delin Bud Unit 300
Remove		
2) Change	P Marmaez, Ivan.	1840 W 49 ST Suite 509
Remove 3) Change	VP Torres, Rolando	1840 W 495- Suite 509
Remove		thaleah 12 33012
4) Change		
Remove		
S) Change		
Remove		
δ) Change		
Add Remove		

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
fan amendment provider for an archa	ange, reclassification, or cancellation of issued shares.
provisions for implementing the amen-	adge. reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	
(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 cast 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.	
Signature (By a director, president of other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cours appointed fiduciary by that fiduciary)	-
TVAN MOTTNEZ (Typed or printed name of person signing) P(ESident (Title of person signing)	-