P17000088276

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19 JAN 14 PH IO: 39

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Grisel Jaime PA		
DOCUMENT NUM	P1000088276		
The enclosed Article	rs of Amendment and fee are su	bmitted for filing.	
Please return all corr	respondence concerning this ma	tter to the following:	
	lvette Ruiz		
		Name of Contact Person	1
	IR Professional Services Inc		
		Firm/ Company	
	12150 SW 128 Court Suite 2		
		Address	
	Miami FL 33186		
	_	City/ State and Zip Cod-	e
irse	rvices@bellsouth.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	ion concerning this matter, pleas	se call:	
Ivette Ruiz		at (<u>305</u>	206-4495
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for 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		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

19 JAH 14 PH 10: 39

Grisel Jaime PA

(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000088276	filed with the Florida Dept. of State
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Grisel J Ruiz PA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "I	To". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	
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 addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
Nam Davietaned Agant's Signature if shanning Dagietaned Agants	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Signature of New R	egistered Agent, if changing
oignamic of them it	-3

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 Do	<u>oe</u>	6
X Remove	Y	Mike Jo	<u>ones</u>	11/2/11
X Add	<u>sv</u>	Sally S _I	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address 11255 SW 234 Terrace Homestead, EL 33032
1) X Change	Р		Grisel J Ruiz	11255 SW 234 Terrace
Add				Homestead, FL 33032
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Article Attach additional sheets, if necessary).	(Be specific)	19 JAN	
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	<u>, </u>		
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If an amendment provides for an excha	mge reclassification or cancell	ation of issued shares.	
provisions for implementing the amen	dment if not contained in the a	mendment itself:	
(if not applicable, indicate N/A)			
	 		
		·	
			

The date of each amendment(s) ad date this document was signed.	option: if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	(voting group)
action was not required.	(voting group) pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder
selected	refor president or other officer – if directors or officers have not been I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) Grisel J. Ruiz (Typed or printed name of person signing)
	Preadent (Title of person signing)