P180000049101

(Re	equestor's Name)	
(Ad	Idress)	
(Ad	Idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Revenue Cycle C	Consulting Inc	
DOCUMENT NUMB	P18000049101		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
i	Frank Alfonso Jr		
-		Name of Contact Persor	1
-		Firm/ Company	
Ş	9055 SW 73rd Court, # 15	05	
_		Address	
1	Miami, FL 33156		
-		City/ State and Zip Code	e
franka	ilfonso@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Frank Alfonso		at (<u>407</u>	920-6080
Name o	f Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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)
Ame Divis P.O.	ing Address Indment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	01	
REVENUE CYCLE CONSULTING INC		
(Name of Corporation	on as currently filed with the Florida De	ept. of State)
P18000049101		
(Docum	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:	
-NA-		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association." or the	" "Inc," or "Co". A professional corpo	rporated" or the abbreviation or the oration name must contain the
	-NA-	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	RESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	<u>-NA-</u>	12 12 T
		<u> </u>
		name of the
D. If amending the registered agent and/or register new registered agent and/or the new registered		iame of the
-NA-		
Name of New Registered Agent		<u> </u>
	(Florida street address)	
	(Florida Street daaress)	
New Registered Office Address:	(City)	, Florida (Zip Code)
	(O.I.)	(
New Registered Agent's Signature, if changing Reg	istered Agent:	
I hereby accept the appointment as registered agent.	I am familiar with and accept the obligat	ions 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)	Title	<u>Name</u>	Address
I) Change	P	Magnus Equity Partners Inc	9055 SW 73rd Ct
Add			1505
X Remove			Miami, FL 33156
2) Change	Р	Frank Alfonso Jr	9055 SW 73rd Ct
X Add			1505
Remove			Miami, FL 33156
3) Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change	_		
Add			
Remove			
6) Change			
Add			
Remove			

NA -	nal sheets, if necessar	ry). (Be specific)			
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If an amendm	ent provides for an	exchange, reclassit	fication, or cancellat	tion of issued shares	1
provisions for	r implementing the plicable, indicate N/	amendment if not	contained in the am	endment itself:	
(ij nin upj	medine, maicule ivi	,,,			
A I A					
NA - 					
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NA -					
NA -				-1	
NA -					
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NA -					
NA -					

	08/20/2018	
The date of each amendment(s) a	doption:	, if other than t
date this document was signed.		
	20/2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will be partment of State's records.	ll not be listed as ti
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted 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):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adaction was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were act action was not required.	lopted by the incorporators without shareholder action and shareholder	
08/20/20 Dated	18	
Signature	director, president or other officer – if directors or officers have not been	
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	FRANK ALFONSO JR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	