P2100079390

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(Business Entity Name)
(Document Number)
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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _____

DOCUMENT NUMBER: P21000079380

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANCISCO DEL GALLEGO

Name of Contact Person

QUALITYMED CR CORP

Firm/ Company

1451 NW 108th AVE APT 310

Address

PLANTATION, FL 33322

City/ State and Zip Code

XAR.INTL@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 FRANCISCO DEL GALLEGO
 at (954)
 9074110

 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:

S35 Filing Fee

□ \$43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Talłahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

N/A

(Name of Corporation as currently filed with the Florida Dept. of State)

N/A

(Document Number of Corporation (if known)

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:

N/A	The	new
	tion," "company," or "incorporated" or the abbreviation "Cor Co". A professional corporation name must contain the w	$p_{}$
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>	<u>N/A</u>	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	N/A	
D. <u>If amending the registered agent and/or registered of</u> <u>new registered agent and/or the new registered office</u> <u>Name of New Registered Agent</u>	Ice and ress in rioring. Prief the basic of the $\cdot \cdot \cdot \cdot = \cdot \cdot \cdot$	
	lorida street address)	
<u>New Registered Office Address</u> :	(<i>City</i>), Florida (<i>Zip Code</i>)	

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) (c), F.S.

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)

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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:	., unu 3u	ny sound, so us un Auu.	
<u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	Address
1) Change	<u>VP</u>	WILHELM F. GEORGI DEL GALL	830 ALMERIA AVE
X Add			CORAL GABLES, FL 33134
Remove			
2) Change	D	DIEGO M. RUBIANO ACOSTA	3713 SEDGEWICK PL
XAdd			ORLANDO, FL 32806
Remove	D	HUGO A. FIGUEROA PADILLA	7619 PACIFIC HEIGHTS CIR
X Add			ORLANDO. FL 32835
Remove			
4) Change	-		
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	i <u>cles, enter change(s) here</u> : (Be specific)
N/A	
· · · · · · · · · · · · · · · · · · ·	
	·····
F. If an amondment provides for an each	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
N/A	

· ·	11/12/2021	
The date of each amendment	t(s) adoption:	, if other than the
date this document was signed	h	
	11/12/2021	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date will not be be be attended of State's records.	ot be listed as the
Adoption of Amendment(s)	(<u>CHECK_ONE</u>)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder action and sh	nareholder
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by N/A	."	
	(voting group)	
11/12/	/2021	

Dated
Signature <u>Frences 5612Del Galleco</u> (By a director, president or other officer – if directors or officers have not been
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cour appointed fiduciary by that fiduciary)
FRANCISCO DEL GALLEGO
(Typed or printed name of person signing)

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(Title of person signing)