P92000007047

(Requestor's Name) (Address) (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL
Certified Copies Certificates of Status	(Business Entity Name)
Certified Copies Certificates of Status	(Document Number)
	·
Special Instructions to Filing Officer:	Certified Copies Certificates of Status
Special manucitors to Filling Officer.	Special Instructions to Filing Officer
	Special manufactoris to 1 ming Gineer.

Office Use Only



000055906900

06/20/05--01046--001 **43.75



a planged

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Metro-Dade Investigations and Detective Services, Inc				
DOCUMENT N	UMBER: P92000007047			
The enclosed Arti	icles of Amendment and fee a	are submitted for filing.		
Please return all c	orrespondence concerning th	is matter to the following:		
	Low	ell M Goode		
,	(Name	of Contact Person)		
	Goode Med	vin Weissman, LLC		
	(Fi	rm/ Company)		
	6330	SW 41 Court		
		(Address)		
	Davie,	Florida 33314		
	(City/ St	ate/ and Zip Code)		
For further inform	ation concerning this matter,	please call:		
Lowell M Goode		at (954) 581-080	1	
(Nam	e of Contact Person)	(Area Code & Daytim	e Telephone Number)	
Enclosed is a chec	k for the following amount:			
□ \$35 Filing Fee		☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.C	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		orations reet	

Articles of Amendment

Articles of Incorporation of Metro-Dade Investigations and Detective Services, Incorporated (Name of corporation as currently filed with the Florida Dept. of State) P92000007047 (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: NEW CORPORATE NAME (if changing): Doral Investigations Associates, Inc. (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) Change of Registered Agent: From - Rafael, Eduardo P 9441 SW 49 Street, Cooper City, FL 33328 To - Lowell M Goode 6330 SW 41 Court, Davie, FL 33314 (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: June 10, 2005
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
Signed this 10 day of Twe. 2005. Signature
(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 court appointed fiduciary by that fiduciary)
Eduardo P. Rafael
(Typed or printed name of person signing)
Director
(Title of person signing)

FILING FEE: \$35