## P95110060059

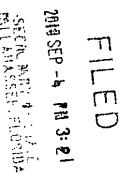
(Re	equestor's Name)	
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I ALBRITTON

## COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATIO	N:Ouest Corporatio	n of America, Inc.		
DOCUMENT NUMBER: F	95000066089			
The enclosed Articles of Ame		bmitted for filing.		
Please return all corresponder	nce concerning this mat	ter to the following:		
Mike F	Roshaven			
	<del></del>	Name of Contact Pe	rson	
Quest	Corporation of Amer			
17220	Firm/ Company 17220 Camelot Court			
		Address	·	
l and i	D'Inkon El 24629	Address		
Land (	D' Lakes, FL 34638			
		City/ State and Zip C	Jode	
Mike.Rosha	ven@QCAusa.com		,	
E-	mail address: (to be us	ed for future annual rep	port notification)	
For further information conce	rning this matter, pleas	e call:		
Lori Morgan		813	926-2942	
Name of Contact Person Ar			Ode & Daytime Telephone Number	
Enclosed is a check for the fo	Howing amount made p	ayable to the Florida I	Department of State:	
*	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Certificate of Status	
Mailing Ac Amendmen Division of P.O. Box 6; Tallahassee	t Section Corporations 327	Am Div Clit	eet Address mendment Section rision of Corporations fton Building of Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

es of Incorporation of

quest Corporationol America, inc.			
(Name of Corp	oration as curren	tly filed with the Florida De	pt. of State)
P95000066089			
1)	Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	lorida Statutes, thi	s Florida Profit Corporation :	adopts the following amendment(
A. If amending name, enter the new name of	the corporation:		
n/a			The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation 'word "chartered," "professional association," of	Corp, "Inc," or	"Co". A professional corpo-	porated" or the abbreviation
B. Enter new principal office address, if appli	icable:	n/a	
(Principal office address MUST BE A STREET			<u></u>
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFIC	E BOX)	n/a	7073 J
			<u> </u>
D. If amending the registered agent and/or renew registered agent and/or the new registered.			me of the
Name of New Registered Agent			
			<del></del>
<del></del>	(Florida s	treet address)	
		,	(S), .2.1.
New Registered Office Address:		(City)	_, Florida (Zip Code)
New Registered Agent's Signature, if changing			
I hereby accept the appointment as registered ag	eni i am jamiliai	чин апа ассері іне обидано	ns 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: <u>X</u> Change	PT	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>	<u>Addres</u> s	
X Change	S	Diane G. Hackney	17220 Camelot Court	
Add			Land O' Lakes, FL 34638	
Remove			Change from S to Asst. VP	
2) Change				
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additional she	ng additional Articles, en eets, if necessary).    (Be s	pecific)	<u>.</u>		
n/a					
				•	
		-			
	<del> </del>		·		
				·	
. <u>If an amendment pro</u>	ovides for an exchange, r	reclassification, or	cancellation of issue	ed shares,	
provisions for imple (if not applicabl	ementing the amendmen	<u>t if not contained i</u>	n the amendment its	self:	
n/a	,,				
	<del></del>				
	,				

	n/a	
The date of each amendment(s) ac	option:	, if other thar
date this document was signed.		
n/a		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file o	
	(no more than 20 days after time name.ni file t	ant )
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirer partment of State's records.	nents, this date will not be listed as
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the fficient for approval.	amendment(s)
	roved by the shareholders through voting groups. The followard voting group entitled to vote separately on the amend	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	pted by the board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and sh	narcholder
8/27/2018 Dated	)—————————————————————————————————————	
Signature (By 3 di	rector, president or other officer – if directors or officers ha	aug nyt hoen
	l, by an incorporator – if in the hands of a receiver, trustee,	
	ed fiduciary by that fiduciary)	
	Sharlene Lairscey	
	(Typed or printed name of person signing)	
	President, Director	
	(Title of person signing)	

the

the