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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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SEP 02 2014 C. CARROTYGOS

COVER LETTER

Division of Corporations
NAME OF CORPORATION: SURPLEX Rejectal Associates, Incoment number: P950000 67787
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Supplex Referral Associates The Firm Company 2170 S.R. 434 West Suite 300 Address Longwood FL 32779 City/ State and Zip Code E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report not recation)
For further information concerning this matter, please call:
Name of Contact Person at (407) 399-7994 Area Code & Daytime Telephone Number
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:
□ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

is enclosed)

Articles of Amendment to Articles of Incorporation of



Sunplex Referral A	35000 ates, Inc14 AUG 25 PM 3: 17
(Name of Corporation as currently filed with the I	Florida Dept. of State)
295000067757	TALLAHARA CANADA
(Document Number of Corporation (
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
NA	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	n)a
(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)	NA
	Mar Million and Allerthia Control of the Control of
D. If amending the registered agent and/or registered office add	lress in Florida, enter the name of the
new registered agent and/or the new registered office address	
N CN D	N/A
Name of New Registered Agent	
(Florida st	treet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	
	Nytr
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	PT John	<u>Doe</u>	
X Remove	V Mike	Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	<u> </u>	Richard D Miller	2170 S. R. 434 West Ste 300
Add			Longwood FL 32779
Remove			
2) Change		Mary S. Scott	2170 5 R 434 Loest Stc 300
Add			Fordmoog Er 35236
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach (ding or adding additional shee	g additional Art ts, if necessary).	ticles, enter c (Be specifi	<u>hange(s) here</u> : <i>c)</i>			
	NIA						
							
							
		_					
	LAPLE*						
provisi	ions for impler	vides for an exc menting the am , indicate N/A)	hange, reclas	sification, or c ot contained in	ancellation of ison the amendment	sued shares, itself:	
			·				
	-						
							
							

The date of each amendment(s) adopti	ion:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.	
	ed by the shareholders through voting groups. The following statement h voting group entitled to vote separately on the amendment(s).	
"The number of votes cast for the	he amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder	
Dated	3-20-14	
selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iducions by that fiduciary)	
	ONALD J. HACHENBERGER (Typed or printed name of person signing)	_
) (RECTOR PRESIDENT, SHARE HOLDER, (Title of person signing)	SECRETARY,
		TREASURE