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TO: Amendment Section

Division of Corpo	prations		
NAME OF CORPOR	RATION: Jorg	je L. Suar	ez, P.A.
DOCUMENT NUMB	BER:	030101	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Conchita	Escobar	
		Name of Contact Person	
		Firm/ Company	
	3735 SW	8th Street	, Suite 101
	Coral Gra	8th Street Address bles, FL	33134
		City/ State and Zip Code	
	JLSUAR	E2152@ad.	COM
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Conchit	a Escobar	at (_305	de & Daytime Telephone Number
Name o	of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	rtment of State:
\$35 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)
Mailing Address Street Address			
	ndment Section	Amend	ment Section
Division of Corporations Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			
1 64110		2001 D	ACCUST COMO CHOIC

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Document Number of Corporation (if known)		-
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit</i> s Articles of Incorporation:	Corporation adopts the following	g amendment(s)
. If amending name, enter the new name of the corporation:	_	
Bankruptcy Legal Services,	P. A .	_The new
ame must be distinguishable and contain the word "corporation," "company Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profe- cord "chartered," "professional association." or the abbreviation "P.A."	," or "incorporated" or the a	bbreviation contain the
. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u>)		-
		-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		-
	70.7	-
. If amending the registered agent and/or registered office address in Florida new registered agent and/or the new registered office address:	, enter the name of the	11
Name of New Registered Agent	24 PH	
(Florida street address)	f	
New Registered Office Address.	, Florida	. (*
(City)	(Zip Code)	

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 D	<u>loe</u>	
X Remove	<u>V</u> <u>Mike J</u>	one <u>s</u>	
X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P51D	JORGE L. SULREZ	3735 SW 8 Street
Add			Suite 101
Remove			CORM GABLES, FL
2) Change	PSTD	CONCLATTA ESCOBAR	3735 SW & Street
Add			54.6.101
Remove			Coral Gables FL.
3) Change			33134
Add			
Remove			
			
4) L Change			
Add			
Remove			
5) Change			
Add			
Remove			
Δ [] αι			
6) Change	 -		
L Add			
Remove			

E. If ame (Attach	inding or adding addition additional sheets, if nece	nal Articles, enter i ssary). (Be specia	<u>change(s) here</u> : fic)		
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. <u>If an a</u> provi	mendment provides for sions for implementing to if not applicable, indicate	an exchange, recla he amendment if n N/A)	issification, or car not contained in th	cellation of issue te amendment its	<u>d shares.</u> e <u>lf:</u>
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The date of each amendment(s) adoption: FEBRUARY 19, 2014 date this document was signed.	, if other th
ffective date if applicable:	
(no more than 90 days after amendment file date)	
doption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	ıt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	rment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voung group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareho action was not required.	lder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated Howary 19, 2014	
Signature (By a director, president or other officer —If directors or officers have not bee	
selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)	n ourt
Ye can keep	SUAREZ
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	