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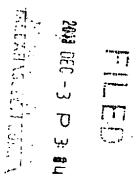
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DEC 12 2018 T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION:Access Medica	l Group, Inc.	
DOCUMENT NUM	1.03053		
The enclosed Article	es of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Joseph Rapa		
	****	Name of Contact Persor	1
	Access Medical Group		
		Firm/ Company	
	410 Chimney Rock Circle		
		Address	· · · · · · · · · · · · · · · · · · ·
	Niceville, Florida 32578		
		City/ State and Zip Code	2
gop	ack7@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Joseph Rapa		at (226-2895
Name	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment 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)
<u>M</u>	ailing Address		Address
	mendment Section		ment Section
		131	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

2011 DEC -3 P 3: 84

Admiral Marketing Corporation	The second state of the se
(Name of Corporation as curren	tly filed with the Florida Dept. of State)
S16126	•
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	8184 Jamaica Road South
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville, FL 32216
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	8184 Jamaica Road South
	Jacksonville, FL 32216
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	
Name of New Registered Agent Joanne D. Moser	
8184 Jamaica Road Sout	h
(Florida s	street address)
New Registered Office Address: Jacksonville	, Florida
	(City) (Zip Code)

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

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	<u>PT</u>	John Do	<u>oc</u>		
X Remove	<u>v</u>	Mike Jones			
X Add	<u>şv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change	P		Barbara J. Lepper		8991 Hunt Valley Drive W
Add X Remove					Jacksonville, FL 32257
2) X Change	PVS		Joanne D. Moser		8184 Jamaica Road South
Add		_			Jacksonville, FL 32216
Remove					
3) Change		_	***		
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_ _			
Add					
Remove					

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
	
If an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adop	tion:, if other than the
late this document was signed.	
Effective date <u>if applicable</u> :	
•	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory filing requirements, this date will not be listed as the tment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were suffice.	d by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	yed by the shareholders through voting groups. The following statement ch 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 adopte action was not required.	d by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder action and shareholder
09/25/2018 Dated	
selected, b	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)
Jo	anne D. Moser
	(Typed or printed name of person signing)
cu	rrent Vice President
-	(Title of person signing)