## P03000077892

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Certified Copies	_ Ceri	tificates	of Status
Special Instructions to	Filing Offic	er:	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: $\stackrel{ ext{S}}{\_}$	outh Florida Affiliated Health Insurers, Inc.
DOCUMENT NUMBER: P0300	
The enclosed Articles of Amendm	ent and fee are submitted for filing.
Please return all correspondence c	oncerning this matter to the following:
Richard Isra	
South Florid	Name of Contact Person la Affiliated Health Insurers, Inc.
	Firm/ Company
1060 Winch	ester Road NE
	Address
Huntsville,	Alabama 35811
	City/ State and Zip Code
rickbamains	urance@gmail.com
E-mail	address: (to be used for future annual report notification)
For further information concerning	this matter, please call:
Richard Israel	at () 698-8774
Name of Contact Po	
Enclosed is a check for the followi	ng amount made payable to the Florida Department of State:
<del>-</del>	75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee ficate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)
Mailing Addres Amendment Sec Division of Corp P.O. Box 6327 Tallahassee, FL	ion Amendment Section orations Division of Corporations The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of

FILED

South Florida Affiliated health Insurers, Inc.	2022 OCT -5 AH 10: 58
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P03000077892	JAIT HASSEL
(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) t
A. If amending name, enter the new name of the corporation:	
	Thencw
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1060 Winchester Road NE
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Huntsville, Alabama
	35811
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre	
(Florida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	nt:
hereby accept the appointment as registered agent. I am familian	r with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
Check if applicable	
☐ The amendment(s) is/are being filed pursuant to s. 607,0120 (11	) (e), F.S.

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 F nancial 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 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
1) Change	P	Alissa Israel-Gemmel	5867 Triphammer Road
Add X Remove			Lake Worth. Florida 33463
2) X Change	SV	Richard Israel	1060 Winchester Road NE
Add			Huntsville, Alabama 35811
Remove 3) Change	P	Richard Israel	1060 Winchester Road NE Huntsville, Alabama 35811
X Add Remove 4) Change	***************************************		
Add Remove 5) Change Add	<del> </del>		
Remove 6) Change Add Remove			

If amending or adding ac	ditional Articles, enter ch	ange(s) here:		
(Attach additional sheets, i	f necessary). (Be specific	)		
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If an amendment provide	s for an exchange, reclass	ification, or cancel	lation of issued shar	es,
(if not applicable, ind	ting the amendment if no licate N/A)	contained in the i	imenament itsen:	
<u> </u>				***
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The date of each amendment(s)	adoption:	_, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament fite date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this date will repartment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder action and s	hareholder
☐ The amendment(s) was/were a by the shareholders was/were	copted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	for the amendment(s) was/were sufficient for approval	₽ ! 2022 OCT
by	(voting group)	00 10
	(voting group)	U #
09/30/202	72	***
Dated	¥;	AH IO
	282 -	ა ლ
Signaf <del>u</del> re <u>/( /</u>	director, president or other officer – if directors or officers have not been	- 🕉
selec	ted, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoi	nted fiduciary by that fiduciary)	
	Richard Israel	
	(Typed or printed name of person signing)	
	Vice President	
	(Title of person signing)	<del></del>