## P050000080351

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ZOZZ FEB 15 AM II: 48 SECRETARY OF STATE

## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** NAME OF CORPORATION: Pavel Zlatev, Inc. DOCUMENT NUMBER: P05000080351 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pavel G Zlatev Name of Contact Person Pavel Zlatev, Inc. Firm/ Company 1801 North Flagler Drive, Apt 314 Address West Palm Beach, FL 33407 City/ State and Zip Code ponyexpressus@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (561 ) 543-3635

Area Code & Daytime Telephone Number Pavel G Zlatev Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee **\$**35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address Mailing Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations

The Centre of Tallahassee

Tallahassec, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

FILED
2022 FEB 15 AM II: 48

Pavel Zlatev, Inc.	SECRETARY DESTA
(Name of Corporation as curren	thy filed with the Florida Dept. of State AHASSEE, FI
05000080351	-//
(Document Number	of Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this s Articles of Incorporation:	s Florida Profit Corporation adopts the following amendme
. If amending name, enter the new name of the corporation:	
Concierge Nursing Care Palm Beach, Inc.	The new
ame 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.	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
. Enter new principal office address, if applicable:	N/A
Principal office address MUST BE A STREET ADDRESS )	
. Enter new mailing address, if applicable:	NI/A
(Mailing address MAY BE A POST OFFICE BOX)	N/A
<ul> <li>If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address</li> </ul>	
N/A	
Name of New Registered Agent	
- TT - 1	
(riorau s	treet address)
New Registered Office Address:	, Florida (Zip Code)
	(City) (Zip Code)
ew Registered Agent's Signature, if changing Registered Agen	ut;
hereby accept the appointment as registered agent. I am familiar	
Cionatum of Man.	Parietarad Agant if champing
Signature of New	Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 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 Doc		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change				
Add				
Remove				_
2) Change			 	
Add				
Remove 3) Change				_
Add				
Remove				_
4) Change			 	_
Add			<del></del>	_
Remove				_
5) Change			 	
Add				
Remove				_
6) Change		_		
Add				
Remove				_

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	
provisions for implementing the amen	ange, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) add	ption:	, if other than the
date 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 blo document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this artment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were adop by the shareholders was/were suff	ited by the shareholders. The number of votes east for the amendm ficient for approval.	ent(s)
☐ The amendment(s) was/were appromust be separately provided for e	oved by the shareholders through voting groups. The following state ach voting group entitled to vote separately on the amendment(s):	tement
by	or the amendment(s) was/were sufficient for approval  (young group)  (2000)	
	1 - 2020 J	
selected.	ector, president or other officer – if directors or officers have not be by an incorporator – if in the hands of a receiver, trustee, or other d fiduciary by that fiduciary)	court
F	Pavel G Zlatev	
-	(Typed or printed name of person signing)	
ī	President	<u> </u>
<del>-</del>	(Title of person signing)	