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COVER LETTER

TO: Amendment Section Division of Corporations

	RATION: Solumons - A Com	ibined Center for Therapy a	nd Learning, Inc.
DOCUMENT NUMI	BER: P06000012082		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	itter to the following:	
	Blaine H. Hibbered, Esq.		
		Name of Contact Person	1
	Blaine H. Hibberd, P.A.		
		Firm Company	
	612 SE Central Parkway		
		Address	
	Stuart, FL 34994		
		City/ State and Zip Code	<u>. </u>
	blaine@hiblaw.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, plea		
Blaine H. Hibberd		at () 600-7646 de & Daytime Telephone Number
Name	of Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co 2415 Y	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303



Articles of Amendment to Articles of Incorporation οſ

SOLUTIONS - A COMBINED CENTER FOR THERAPY AND LEARNIN

	on as currently filed with the Florida Dept. of S	<u> </u>	Ś
	P06000012082	He_	=
(Docum	ent Number of Corporation (if known)	70	=
ursuant to the provisions of section 607,1006, Florida Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts	the following ame	ndme
. If amending name, enter the new name of the co	rporation:		
		The	new
unc must be distinguishable and contain the word "co lnc.," or Co.," or the designation "Corp," "Inc chartered," "professional association," or the abbre	" or "Co". A professional corporation name	e abbreviation "Co must contain the	rp.," word
. Enter new principal office address, if applicable	<u> </u>		
Principal office address MUST BE A STREET ADD	ORESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BO)	<u></u>		
		fthe	
). If amending the registered agent and/or register	red office address in Florida, enter the name o	f the	
new registered agent and/or the new registered	red office address in Florida, enter the name o office address:	f the	
O. If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent	red office address in Florida, enter the name o office address:	f the	
new registered agent and/or the new registered	office address:	f the	
new registered agent and/or the new registered	red office address in Florida, enter the name office address: (Florida street address)	f the	
new registered agent and/or the new registered	office address: (Florida street address)	orida	
Name of New Registered Agent	office address: (Florida street address)	orida	
Name of New Registered Agent	office address: (Florida street address)		
Name of New Registered Agent New Registered Office Address:	office address: (Florida sirvet address)	oridaorida	
Name of New Registered Agent	office address: (Florida sirvet address)	oridaorida	
Name of New Registered Agent New Registered Office Address:	office address: (Florida sirvet address)	oridaorida	
Name of New Registered Agent New Registered Office Address:	office address: (Florida sirvet address)	oridaorida	
Name of New Registered Agent New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Rejectory accept the appointment as registered agent.	office address: (Florida sirvet address)	oridaorida	

\supset	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			
	Evample: <u>X</u> Change	<u>b.l.</u>	John Doe	
	X Remove	\underline{Y}	Mike Jones	
	X Add	<u>sv</u>	Sally Smith	
	Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Addre5s
	1) Change	P, D	Janelle B. McCandless	1508 SE Lark Blvd
	Add			Stuart, FL 34996
	Remove 2) Change	D	Anita "Ana" McCurry	1483 SW Bougainvillea Ave.
	X Add			Port St. Lucie, FL 34953
\bigcirc	Remove 3) Change	_D	Tiffany Luque	1483 SW Bougainvillea Ave.
	_ X _Add			Port St. Lucie, FL 34953
	Remove			
	4) Change			
	Add			
	Remove			
	5) Change			
	Add Remove			
	6) Change			
	Add			
	Remove			

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and

	ets, if necessary), — (F	•			
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F. If an amendment pr provisions for impl	ovides for an exchan	ge, reclassification	, or cancellation o	ont itself:	
provisions for impl	le, indicate NA)	ment if not contain	ied in the america	ent usen.	
τη ποι αμμπειασί	ie, materia 1- 11 j				
	<u> </u>		<u> </u>		
		. <u>.</u>	<u> </u>		

The date of each amendment(s) ad	option: June 10, 2022	, if other than the
date this document was signed.		
Effective date if applicable:	June 10, 2022	
	tno more than 90 days after amendment file d	ate)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requiren partment of State's records.	nents, this date will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sha	reholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the flicient for approval.	amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The followach voting group cutitled to vote separately on the amend	owing statement lment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
·	(voting group)	
Dated Ju	ne 10, 2022 Resident forces.	
(By a d	rector, president or other officer - if directors or officers ha	ave not been
	I, by an incorporator – if in the hands of a receiver, trustee, ed fiduciary by that fiduciary)	or other court
• • • • • • • • • • • • • • • • • • • •	Janelle McCandless	
	(Typed or printed name of person signing)	, , , , , , , , , , , , , , , , , ,
	President	
	(Title of person signing)	