## P1800018133

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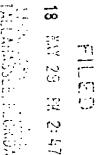
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MAY 31 2018 S. YOUNG



## **COVER LETTER**

TO: Amendment Section

Division of Corporations							
NAME OF CORPORATION: _	HEU	ER REA	LTY	P.A.			
DOCUMENT NUMBER:	P181	0000181	33				
The enclosed Articles of Amendm	ent and fee are submit	ted for filing.					
Please return all correspondence c	oncerning this matter t	o the following:					
<del></del> -	Paul	R. SH					
	ľ	Name of Contact Pe	erson				
	As 1214 W	sional Accou sociates, Indest Bearss A pa, Florida 33	c. Avenue				
	City/ State and Zip Code						
E-mail	SONTA @ address: (to be used to	TEAM 54 or future annual re	Port notific	n ation)			
For further information concerning	g this matter, please ca	31:					
SONJA J.	+ELLER Person	at ( <u>&amp; l</u>	3 ) a Code & I	938 - 0909 Daytime Telephone Number			
Enclosed is a check for the follow							
	ificate of Status	1843.75 Filing Fee Certified Copy (Additional copy is enclosed)	S Co	52.50 Filing Fee ertificate of Status ertified Copy additional Copy enclosed)			
Mailing Addre Amendment Sec Division of Cor P.O. Box 6327	ction	Ar Di	reet Addre mendment S ivision of C lifton Build	Section orporations			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## Articles of Amendment

to

Articles of Incorporation

αf

10	N 0				
HELLER KEALTY	<u>, P. H</u>				
(Name of Corporation as currently fi	<u>led with the Florida Dept. of State</u> )				
P18000018132	3				
(Document Number of Co					
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flo</i> its Articles of Incorporation:	rida Profit Corporation adopts the following amendment(s) to				
A. If amending name, enter the new name of the corporation:					
C - 1 - 1 - 1 - 1	λ Δ.				
name must be distinguishable and contain the word "corporation," "Corp" "Inc.," or Co.," or the designation "Corp." "Inc," or "Co" word "chartered," "professional association," or the abbreviation "P.A	"company," or "incorporated" or the abbreviation ". A professional corporation name must contain the				
B. Enter new principal office address, if applicable:	<del>_</del>				
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	1267 NASHVILLE DOINE				
-	WESLEY CHAREL FL. 33544				
·	100300 / CINHCO / 12:202 / 1				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<del></del>				
_	SAME AS ABOUT				
	1.: 00				
-					
D. If amending the registered agent and/or registered office address	in Florida, enter the name of the				
new registered agent and/or the new registered of fice address:  Name of New Registered Agent // O	CHANGE				
	J = = = = = = = = = = = = = = = = = = =				
(Florida street o	address)				
New Registered Office Address:	2-1, -1				
<u>New Registerea Office Address</u> : (Ci	, Florida				
•	V. C				
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.				
N I A					
Signature of New Regi.	stered 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name /	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			<del></del>
Remove			

	onal sheets, if ne	cessary).	(Be specifi	(c)				
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an amenda	nent provides fo or implementin	or an exch:	ange, recla:	sification, or	cancellation	of issued sha	res.	
(if not a	oplicable, indica	ite N/A)						
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The date of each amendment(s) adoption:	MAY	<u> 24, 2018                                      </u>	, if other than the
date this document was signed.	·	,	
Effective date if applicable:	MBY	24 2018	
(no n	nore than 90 days	after amendment file date)	
Note: If the date inserted in this block does not mee document's effective date on the Department of State's	t the applicable strecords.	tatutory filing requirements, the	his date will not be listed as the
Adoption of Amendment(s) (CHECK (	ONE)		
The amendment(s) was/were adopted by the shareho by the shareholders was/were sufficient for approva	olders. The numb	er of votes cast for the amendr	nent(s)
☐ The amendment(s) was/were approved by the sharel must be separately provided for each voting group	holders through ventitled to vote se	oting groups. The following standard parately on the amendment(s)	atement :
"The number of votes cast for the amendment	(s) was/were suffi	cient for approval	
by			
(voting gro	эир)		
☐ The amendment(s) was/were adopted by the board of action was not required.	of directors withou	ut shareholder action and share	cholder
☐ The amendment(s) was/were adopted by the incorporaction was not required.	orators without sh	areholder action and sharehold	ler
Signature  (By a director, president or selected, by an incorporate appointed fiduciary by tha	or – if in the hand	directors or officers have not sof a receiver, trustee, or other	been r court
Se	ONTA  -	ELLER	
		of person signing)	
	PRESID	INT	
<del></del>	(Title of pers	on signing)	<del> </del>