P21000012327

| (Red | questor's Name) | | | |
|---|-----------------------|------|--|--|
| (Address) | | | | |
| (Add | dress) | | | |
| (Cit | y/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu: | siness Entity Nar | ne) | | |
| (Do: | cument Number) | | | |
| Certified Copies Certificates of Status | | | | |
| Special Instructions to Filing Officer: | | | | |
| | J. HORNI NOV 1 U 7 | | | |
| | MAIR | .02. | | |
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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations | | | | | | |
|--|--|--|--|--|--|--|
| M & J PREFER | RENCE MENTAL HEALTH CORP | | | | | |
| NAME OF CORPORATION: | 21000012327 | | | | | |
| DOCUMENT NUMBER: | -21000012327 | | | | | |
| The enclosed Articles of Amendment and fee ar | e submitted for filing. | | | | | |
| Please return all correspondence concerning this | matter to the following: | | | | | |
| | LENNY E RODRIGUEZ | | | | | |
| | Name of Contact Person | | | | | |
| М & . | J PREFERENCE MENTAL HEALTH CORP | | | | | |
| | Firm/ Company | | | | | |
| | 7925 NW 12nd ST SUITE 122 | | | | | |
| | Address | | | | | |
| | DORAL FL 33126 | | | | | |
| | City/ State and Zip Code | | | | | |
| | edu051789@icloud.com | | | | | |
| E-mail address: (to b | be used for future annual report notification) | | | | | |
| For further information concerning this matter, p | olease call: | | | | | |
| LENNY E RODRIGUEZ | 786 354-7057 | | | | | |
| Name of Contact Person | Area Code & Daytime Telephone Number | | | | | |
| Enclosed is a check for the following amount ma | ade payable to the Florida Department of State: | | | | | |
| \$35 Filing Fee Certificate of Statu | & S43.75 Filing Fee & S52.50 Filing Fee certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | | | | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 | Street Address Amendment Section Division of Corporations The Centre of Tallahassee | | | | | |

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

FILED

M & J PREFERENCE MENTAL HEALTH CORP

2021 OCT 28 PM 5: 21

| (Name o | of Corporation as currently | filed with the Florida | Dept. of Stafe) | TARY OF STA |
|--|--------------------------------|--------------------------|----------------------|--|
| - | P21000012 | 2327 | FALLÁŘ | ASSEE, FOR |
| | (Document Number of | Corporation (if known |) | · |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this i | Florida Profit Corporal | tion adopts the foll | owing amendment(s) to |
| A. If amending name, enter the new na | ame of the corporation: | | | |
| | | | | The new |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association," | Corp," "Inc," or "Co". A | | | |
| B. Enter new principal office address, | if applicable: | | | |
| (Principal office address <u>MUST BE A S</u> | | | | |
| | | • | | |
| | | | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST) | | _ | | |
| | | | <u>-</u> . | · <u>- · · · · · · · · · · · · · · · · · ·</u> |
| | | | | |
| D. If amending the registered agent ar | nd/or registered office addr | ess in Florida, enter tl | he name of the | |
| new registered agent and/or the new | w registered office address: | | | |
| Name of New Registered Agent | LENNY EDUAR | RDO RODRIGUEZ | | |
| Name of New Registered Agent | 4401 WEST FLAGLER ST | SUITE 2 MIAMI FL | 33134 | |
| | (Florida stre | | | |
| | | PRAL | | 331 2 6 |
| New Registered Office Address: | | | Florida | |
| | | (City) | | (Zip Code) |
| | | | | |
| N. B. I | | | | |
| New Registered Agent's Signature, if c I hereby accept the appointment as regist | | | autions of the nosi | tion |
| r nercity accept the apparament as regist | Lereu ageni. Lum jamiliar n | ліп апа иссері іле оті | ganons of the post | ion. |
| | | | | |
| | * Er | | | |
| | Signature of New Ro | egistered Agent, if chan | ging | |

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)

Example:

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.

| 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) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| I) Change | P | AMADOR, MARIBEL | 7925 NW 12nd ST STE 122 |
| Add | | | DORAL FL 33126 |
| Remove 2) Change | P | RODRIGUEZ, LENNY E | 7925 NW 12nd ST STE 122 |
| X Add | | | DORAL FL 33126 |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| If an amendment provides for an exchange, reclussification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | Attach <i>addi</i> | tional sheets, if | ditional Articles Inecessary). (E | 3e specific) | | | | |
|--|--------------------|-------------------|--------------------------------------|-----------------|------------------|---|----------|-------------|
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | - <u></u> - |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | • | | | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | - | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
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| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | | | | | | | | |
| provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A) | f an a | | . . | | | 4* | | |
| (if not applicable, indicate N/A) | provisions | for implement | ing the amendr | nent if not con | tained in the an | <u>ition of issued st</u> iendment itself: | iares, | |
| | (if not | applicable, indi | icate N/A) | | | | • | |
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10/22/2021

| The date of each amendment(s) adoption: | , if other than the |
|---|--------------------------------|
| date this document was signed. 10/22/2021 | |
| Effective date if applicable: | |
| Effective date if applicable: (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records. | date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE) | |
| The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder ac action was not required. | tion and shareholder |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval. | nt(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s): | ment |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by'' | |
| (voting group) | |
| 10/22/2021 | |
| Dated | |
| | |
| Signature | |
| (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other co | |
| appointed fiduciary by that fiduciary) | urt |
| JULIO CARABALLO | |
| (Typed or printed name of person signing) | |
| VICE PRESIDENT | |
| (Title of person signing) | |