

P99 0000019638

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

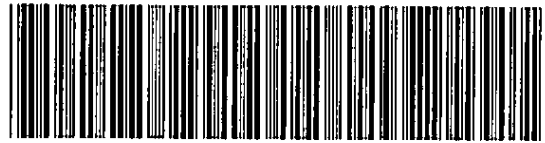
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900378639349

01/03/22--01013--003 **35.00

FILED

2022 JAN -3 AM 10:24

CLERK OF COURT
SOUTH FLA

C. BRUMBLEY
JAN 22 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MED-ONE SHUTTLE, INC.
DOCUMENT NUMBER: P99000018638

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Heidi S. Webb

Name of Contact Person
THE LAW OFFICE OF Heidi S. Webb

140 South Beach Street, Ste. 310	Firm/ Company
----------------------------------	---------------

Daytona Beach, FL 32114	Address
-------------------------	---------

City/ State and Zip Code

heidi@heidiwebb.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Heidi S. Webb 386 257-3332
 _____ at (_____) _____
 Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee
 ☐ \$43.75 Filing Fee & Certificate of Status
 ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
 ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

Med-One Shuttle, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P99000018638

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

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.

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.

FILED
2022 JAN -3 AM 10:21
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	PD	Frances Jack	P.O. Box 730206
<input type="checkbox"/> Add			ORMOND BEACH, FL 32173
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	PD	Frances Jack, Trustee of the Frances Jack Living Trust Dated June 2, 2004	P.O. Box 730206
<input checked="" type="checkbox"/> Add			ORMOND BEACH, FL 32173
<input type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	TD	Pauline Whitfield	P.O. Box 730206
<input type="checkbox"/> Add			ORMOND BEACH, FL 32173
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	TD	Pauline Whitfield, Trustee of the Whitfield Family Revocable Trust Dated October 2, 2020	P.O. Box 730206
<input checked="" type="checkbox"/> Add			ORMOND BEACH, FL 32173
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	D	Steven Jack	P.O. Box 730206
<input type="checkbox"/> Add			ORMOND BEACH, FL 32173
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	D	Steven Jack, Trustee of the Jack Family Revocable Trust Dated November 3, 2020	P.O. Box 730206
<input checked="" type="checkbox"/> Add			ORMOND BEACH, FL 32173
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

[illegible]

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

[illegible]

July 26, 2021

The date of each amendment(s) adoption: _____, if other than the date this document was signed. July 26, 2021

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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

Dated 12/29/2021

Signature Pauline Whitfield
(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 court appointed fiduciary by that fiduciary)

PAULINE WHITFIELD
(Typed or printed name of person signing)

Treasurer / Director
(Title of person signing)