

700201

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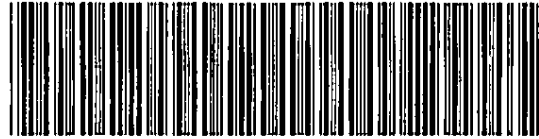
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2022 JUN 24 PM 4:42

SECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER
JUN 11 2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Florida Society of Hearing Healthcare Professionals, Inc.

DOCUMENT NUMBER: 700201

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

Please return all correspondence concerning this matter to the following:

Jason D. Winn, Esq

(Name of Contact Person)

Winn Law

(Firm/ Company)

2709 Killarney Way, Suite 4

(Address)

Tallahassee, FL 32309

(City/ State and Zip Code)

jwinn@jwinnlaw.com

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

For further information concerning this matter, please call:

Jason D. Winn

850

519-5876

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

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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

FILED

2022 JUN 24 PM 4:42

Florida Society of Hearing Healthcare Professionals, Inc.

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

700201

SECRETARY OF STATE
TALLAHASSEE, FL

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

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

Florida Hearing Society, Inc

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name

B. Enter new principal office address, if applicable:

2709 Killarney Way, Suite 4

(Principal office address MUST BE A STREET ADDRESS)

Tallahassee, FL 32309

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2709 Killarney Way, Suite 4

Tallahassee, FL 32309

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:

Jason D. Winn

2709 Killarney Way, Suite 4

(Florida street address)

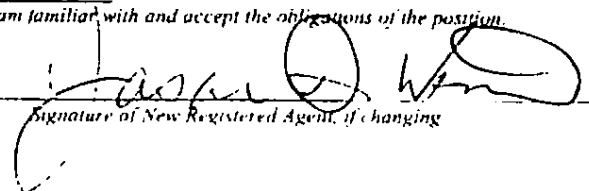
New Registered Office Address:

Tallahassee

Florida 32309
(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

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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	P	Stephen Sherbin	
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	V	Cameron Yordon	
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	D	Ben Brody	
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	T	Gregory Yordon	
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

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

(attach additional sheets, if necessary) (Be specific)

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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	D	Donna Elbin	
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	D	Dean Easterwood	
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add	D	Nick Malatesta	
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add	D	Brian Simmons	5585 Stewart Street Milton, FL 32570
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add	D	Stephen L. Reinshuttle	4119 Sun N Lake Sebring, FL 33872
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add	D	Carey Bowen	2451 N. McMullen Booth Road, #2 Clearwater, FL 33759
<input checked="" type="checkbox"/> Remove			

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

(attach additional sheets, if necessary) (Be specific)

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated April 4, 2022

Signature Stephen Sherbin
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Stephen Sherbin

(Typed or printed name of person signing)

President

(Title of person signing)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

2022 JUN 24 AM 8:03

SECRET
TALLAHASSEE, FL

June 14, 2022

JASON D. WINN, ESQ.
2709 KILLARNEY WAY
SUITE 4
TALLAHASSEE, FL 32309

SUBJECT: THE FLORIDA SOCIETY OF HEARING HEALTHCARE
PROFESSIONALS, INC.
Ref. Number: 700201

We have received your document for THE FLORIDA SOCIETY OF HEARING HEALTHCARE PROFESSIONALS, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check or money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 122A00013308