Division of Corporations

F21000005742

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6380

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Please honor original date 12/13/2021

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

RENEE DUA, M.D., P.C., INC.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	$43.75

DEC 22 2021
S. PRATHER

Electronic Filing Menu Corporate Filing Menu Help

Please honor original date 12/13/2021

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

F20000005742
(Document number of corporation (if known))

1. Renee Dua, M.D., P.C., Inc.
(Name of corporation as it appears on the records of the Department of State)

2. California (Incorporated under laws of)

3. 12/28/2020 (Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation?

5. Heal Doctors IHWA, P.C.
(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

Heal Doctors IHWA, P.C., Inc.
(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. **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: *(City)*, Florida *(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

9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

Title/ Capacity	Name	Address	Type of Action
President, Secretary and Treasurer	Renee Dua	11845 W. Olympic Blvd., Ste 900W Los Angeles, CA 90064	☐Add
			☒Remove
Director	Renee Dua	11845 W. Olympic Blvd., Ste 900W Los Angeles, CA 90064	☐Add
			☒Remove
President Secretary and Treasurer	Justin Zaghi	11845 W. Olympic Blvd., Ste 900W Los Angeles, CA 90064	☒Add
			☐Remove
Director	Justin Zaghi	11845 W. Olympic Blvd., Ste 900W Los Angeles, CA 90064	☒Add
			☐Remove
			☐Add
			☐Remove

0. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

Justi Zaghi
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Justin Zaghi
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE $35.00

Secretary of State

Certificate of Amendment of Articles of Incorporation

Name Change Only - Stock

AMDT-STK-NA

FILED

Secretary of State
State of California

A0900611

Filing Number

11/19/2021

Filing Date

IMPORTANT - Read Instructions before completing this form.

Filing Fee - $30.00

Copy Fees - First Page $1.00 & .50 for each attachment page; Certification Fee – $5.00

1. Corporation Name (Enter the exact name of the corporation as it currently is recorded with the California Secretary of State.)

Renee Dua, M.D., P.C.

2. 7-Digit Secretary of State Entity Number

4649586

3. New Corporation Name

Enter the number, letter or other designation assigned to the provision in the Articles of Incorporation being amended (e.g., "1.", "I", "First", or "One").

Article 1 of the Articles of Incorporation is amended to read:

The name of the corporation is Heal Doctors IHWA, P.C.

4. Approval Statements

4a. The Board of Directors has approved the amendment of the Articles of Incorporation.

4b. Shareholder approval was (**check one**):

☑ By the required vote of shareholders in accordance with California Corporations Code section 902. The total number of outstanding shares of the corporation entitled to vote is 50,000. The number of shares voting in favor of the amendment equaled or exceeded the vote required. The percentage vote required was more than 50%.

OR

☐ Not required because the corporation has no outstanding shares.

Read, sign and date below (See instructions for signature requirements. Note: Both lines must be signed.)

We declare under penalty of perjury under the laws of the State of California that the matters set forth herein are true and correct of our own knowledge and we are authorized by California law to sign.

Date	Signature (Do not leave blank)	Type or Print Name of President
11-19-21	Justi Zagh	Justin Zaghi
11-19-21	Justi Zagh	Justin Zaghi
Date	Signature (Do not leave blank)	Type or Print Name of Secretary

[redacted]

I hereby certify that the foregoing transcript of 1 page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

DEC 07 2021

SHIRLEY N. WEBER, Ph.D., Secretary of State