## Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 fax Number : (305)675-5944

\*\*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 INMUHEALTH COMMUNITY GROUP INC

Certificate of Status	0
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Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

	Articles of Amendment			
	to Articles of Incorporation			
INMUHERI.	+1/2 C = 0f			
(Name of Corporation as current)	THE COMMUN y filed with the Florida Dept. of State	21TY Ord	Jup Fre	
N210	0000 7040	) (	,	
(Доси	ment Number of Corporation (if known	)		
Pursuant to the provisions of section 617.16 amendment(s) to its Articles of Incorporation	006, Florida Statutes, this <i>Florida Not I</i> on:	For Profit Corporation	adopts the follow	ing
A. If amending name, enter the new nam	ne of the corporation:			
name must be distinguishable and contain to "Company" or "Co." may not be used in t	the word "corporation" or "incorporat	ed" or the abbreviation	The ne n "Corp." or "Inc.	env 
B. Enter new principal office address, if (Principal office address MUST BE A STE	unnlinghter			
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF	ble:			
D. If amending the registered agent and/o new registered agent and/or the new re	or registered office address in Florida	, enter the name of th	107 107	
Name of New Registered Agent:	enistered office address:	·····	SHAY I	
<u>New Registered Office Address:</u>	(Florida street address)		7 ATIO	
•		, Florida	77 ° 6	1
	(City)	1	(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.

If amending the Officers and/or Directors, enter the fitte and name of each officer/director being removed and fitte, 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:

F = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office

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, Saily Smith is named the V and S. These should be noted as John Doc. PT as a Change. Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>∨</u> <u>Mi</u>	<u>n Dpe</u> Ke Jones l <u>v Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P		<u> 7485 su 725+</u> <u>5te A255</u>
Remove  2) Change Add	<u> </u>	CASALDUC, Giselle	MIANI, F1 33173 - 5414 9485 SW 725+
Remove 3) Change			<u>ste A255</u> minni Fl 33173.57
Add			223
4) Change Add Remove			SS 80 56
5) Change Add			56
Кеточе			
6) Change			

. If amending or adding addition (Mach additional sheets, if necessity).	onal Articles, enter chan essary). (Be specific)	ge(s) here:					
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	_
Adoption of Amendment(s) (CHECK ONE)	
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/vere adopted by the board of directors.	
Dated 65/ (7/ 2023	
Signature	
(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, trusted, or other court appointed fiduciary by that fiduciary)	-
DAnila Quintant (Typed or printed name of person signing)	
(Typed or printed pame of person signing)	
(Title of person signing)	