N2Z00000 1400

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Cassial Instructions to Cilian Officer			
Special Instructions to Filing Officer:			

Office Use Only



500382149825

02/22/22--01003--014 **35.00

FILED

2022 FEB-22 AM 9: 42

SECRETARY OF STATE

y 2/25/2022

COVER LETTER

NAME OF CORPORATION: Visionary Health Fundation, Inc					
DOCUMENT NUMBER: N2200001400					
The enclosed Articles of Amendment and fee are submitted for filling.					
Please return all correspondence concerning this matter to the following:					
Olubisi Aina (Name of Contact Person)					
(Name of Contact Person)					
Visionary Health Fundation (Firm/Company)					
7901 4th St. N Ste 300					
(Address)					
St. Petersburg, FL 33702 (City/ State and Zip Code)					
(City/ State and Zip Code)					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Olubisi Aina 352-256-2118					
(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:					
S35 Filing Fee S43.75 Filing Fee &					

Mailing Address

FO: Amendment Section

Division of Corporations

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 32363

Articles of Amendment to Articles of Incorporation of

FILED

2022 FEB 22 AM 9: 42

(Name of Corporation as currently filed with the Florid	indution, I	SERBSTALWATE
(Name of Corporation as currently filed with the Florid	a Dept. of State)	TALLAHASSEE
N22000001400		
(Document Nur	nber of Corporation (if k	nown)
Pursuant to the provisions of section 617,1006, Florida Statamendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not Fe</i>	or Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name	ration" or "incorporated	$I^{\prime\prime}$ or the abbreviation "Corp," or "Inc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRES</u>	<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered ones registered agent and/or the new registered office		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(F	lorda street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I am		the obligations of the position.
	Signature of New Regis.	cred 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 <math>P'(D).

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 X Remove X Add	PT John D V Mike John S SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add	Sec	Edwin Cherfilus	7901 4 H St. N Ste 300 St. Petersburg FL 33 KD
2) Change Add		Nadege Lebkinc	7901 4th St. N Ste 300 St. Petersburg EL 33702
3)ChangeAdd	<u>S</u>	Nacmi Houston	7901 4th St. N. Ste 300 St. Petersburg FL 33702
Remove 4)ChangeX (Add	T	Frank White	7901 4th St. N Ste 300 St. Petersburg FL 33702
Remove 5) Change Add			
Remove 6) Change Add			
		icles, enter change(s) here:	
(attach additional she	ets, if necessary).	(Be specific)	

•		
	·	
	<u> </u>	
	/ ,	
	2/10/2012	
The date of each amendment(s) adoption:	(117/2000	if other than th
date this document was signed.	1 /2	
\mathcal{A}/l	2/15/2022 15/2022	
(no more ti	han 90 days after amendment file date) –	

<u>Note:</u> 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.



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

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, trustee, or other court appointed fiduciary by that fiduciary)

(Typed or printed name of person signing)

President

(Title of person signing)