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COR AMND/RESTATE/CORRECT OR O/D RESIGN CITIZENS FOR HEALTH CARE EXCELLENCE, INC.

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Qudit # (((H23000076889 3)))

Articles of Amendment to Articles of Incorporation of

Name of Corporation as currently filed with the Flori	ida Debr of State)		
N23000001739			
(Document N	umber of Corporation (i	(known)	
ursuant to the provisions of section 617.1006, Florida St mendment(s) to its Articles of Incorporation:	tatutes, this Florida Not	For Profit Corporation adop	ts the following
. If amending name, enter the new name of the corp	oration:		
CITIZENS FOR HEALTHCARE EXCELLENCE, INC.			The new
ame must be distinguishable and contain the word "corp Company" or "Co." may not be used in the name.	oration" or "Incorpora	ted" or the abbreviation "Co	rp." or "Inc."
3. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRE</u>	(223		
			202
)3Fi
Enter new mailing address, if applicable:			FEB 2
(Mailing address MAY BE A POST OFFICE BOX)			55° ·
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. If amending the registered agent and/or registered new registered agent and/or the new registered offi		a, enter the name of the	28
Name of New Registered Agent:			
	···	Florida street address)	
New Registered Office Address:			
		Florida	
	(City)	(Zip Code,)
ew Registered Agent's Signature, If changing Registe is reby accept the appointment as registered agent. I an	red Agent: n familiar with and accep	ot the obligations of the positi	on.
		stered Agent, if changing	

Quidit # (((H23000076889 3)))

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)

Framale:

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.

X Change X Remove X Add	<u>Y</u> <u>Mik</u>	Dos Jones y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) X Change Add	<u>T</u>	Cliston Scott Taylor	One South School Ave., Suite 500 Sarasota, FL 34237
Remove			
2) Change Add			202B FEB
Remove 3) Remove Add Remove	• • • • • • • • • • • • • • • • • • • •		
4) Change Add			<u>ω</u>
Remove			
5) Change Add			
Remove			11,4-5-
6) Change Add			
Remove	4/		
R. <u>If amending or ad</u> (uttach additional s	lding additional A heets, if necessary,	rticles, enter change(s) here:). (Be specific)	
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12:17:8AND LAW GF Cudit キ(UH23	ROUP - DOD UTBX89 - 5 111	(FAX)941 917 0506	P.004/0
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		~-	
The date of each amendment(s) addate this document was signed.	loption:		if other than the
Effective date if applicable:	(no more than 90 days after amendmen	a file dead	
	ck does not meet the applicable statutory film		listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were ac was/were sufficient for approve	dopted by the members and the number of vo al.	otes cast for the amendment(s)	

Undit # (((H 230000 76884 3)))

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 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)

Gregory S. Band

(Typed or printed name of person signing)

Incorporator

(Title of person signing)

2023 FEB 28 AM 8: 28