P01000000834

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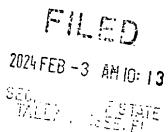
TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: ALONSO HEARIN	G AID, CORP.	
DOCUMENT NUMBE			
	Amendment and fee are sub	omitted for filing.	
Please return all correspo	ondence concerning this mat	ter to the following:	
S	ANDRA L. SANCHEZ		
_		Name of Contact Person	
A	MERICAN AUDIOLOGY	(AA) HEARING, CORP.	
_		Firm/ Company	
7	801 CORAL WAY, SUITE	113	
_		Address	
N	ALAMI, FLORIDA 33155		
_		City/ State and Zip Code	
_	lonsohearingaids@gmail.com	n	
_	~ ~~	ed for future annual report	notification)
	2 man and est. (10 or =		,
For further information	concerning this matter, pleas	se call:	
SANDRA L. SANCHE	zz	at (305) 266-1530 de & Daytime Telephone Number
Name of	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Division The C 2415 I	Address Iment Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810

18/10/23, 10 06

_Attached is a form for filing Articles...on of a Florida Profit Corporation pur - Amendment (1).pdf

Articles of Amendment to Articles of Incorporation of



ALONSO HEARING AID, CORP.

P01000000834	ration as currently	y filed with the Florida Dept. of State)			
(D					
·					
	ocument Number of	Corporation (if known)			
ursuant to the provisions of section 607,1006, Fl ts Articles of Incorporation:	orida Statutes, this i	Florida Profit Corporation adopts the following amendment(s)			
A. If amending name, enter the new name of t	he corporation:				
AMERICAN AUDIOLOGY (AA) HEARING, C		The new			
	Inc," or "Co". A	company," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word			
B. Enter new principal office address, if applic	enhle:	7801 CORAL WAY, SUITE 113			
Principal office address MUST BE A STREET ADDRESS)		MIAMI, FL 33155			
Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)		7801 CORAL WAY, SUITE 113			
	<u> </u>	MIAMI, FL 33155			
D. If amending the registered agent and/or renew registered agent and/or the new registered agent Name of New Registered Agent	ered office address:				
	ISCAYNE BLVD.	#1878			
	(Florida str	eet address)			
New Registered Office Address: MIAM	i	Florida 33137			
THE RESIDENCE PROPERTY.	 	(City) (Zip Code)			

Check if applicable

∃ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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 Icaves 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 \mathbf{r} John Doc X Remove $\underline{\mathbf{y}}$ Mike Jones X Add <u>sv</u> Sally Smith <u>Address</u> Type of Action Title Name (Check One) 1) ____ Change ____ Add __ Remove 2) ____ Change ____ Add Remove 3) ____ Change ___ Add ___ Remove 4) ____ Change ____ Add __ Remove Change ___ Add Remove δ) ____ Change

____ Add

__ Remove

. <u>If amending or adding additional Art</u> (Attach <i>additional sheets, if necessary</i>).	(Be specific)				
∀A					
					<u>.</u>
					
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	<u> </u>				
		en			
If an amendment provides for an exc provisions for implementing the am	<u>:nange, reciassi</u> iendment if not	contained in t	renanon o <u>r issu</u> re amendment i	<u>eu suares.</u> tself:	
(if not applicable, indicate N/A)	icii di icii di icii	COMMUNICATION OF			
LA.					
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			···		
		-			

. . .

The date of each amendment(s) adoption:	ner than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more than 90 days after amenument file dute)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be a document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.	lder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by" (voting group)	
Devel Oct - 18-23	
Signature Saufanch of By-a director, president or other officer - if directors or officers have not been	
Signature Saulanched	
(By a director, president or other) officer - if directors or officers 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)	
(Typed or printed name of person signing)	
President.	
(Title of person signing)	



December 4, 2023

SANDRA L. SANHEZ 7801 CORAL WAY SUITE 113 MIAMI, FL 33135

SUBJECT: ALONSO HEARING AID, CORP

Ref. Number: P01000000834

We have received your document for ALONSO HEARING AID, CORP, 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: 123A00027549



DAVY KARKASON, ESQ.

FOUNDER & ATTORNEY AT LAW

Transnational Matters, PLLC 2121 Biscayne Boulevard, # 1878 Miami, Florida 33137 dk a Transnational Matters.com www.TransnationalMatters.com Office: 305 417 9866

October 19, 2023

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Telephone: 850-245-6050

To Whom It May Concern:

We represent Mrs. Sandra Sanchez, current owner of Alonso Hearing Aid, Corp. We are submitting this packet to amend the name of the company to become, "American Audiology (AA) Hearing, Corp."

Attached herein, you will find our formal amendment packet with all information requested. Shall you need have any questions, please contact us directly at the above mentioned address, email address or phone number.

Regards.

Davy Karkason Esq. Founding Attorney at Law Transnational Matters, PLLC