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R. WHITE.
JUN 0 4 2020

COVER LETTER

TO: Amendment Section

Division of Corporations

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Therapist DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filling Fee & □\$43.75 Filing Fee & ☐S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address **Mailing Address**

Amendment Section
Division of Corporations

Tallahassee, FL 32303

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Articles of Amendment

Articles of Incorporation of

)OOIYOY36 nent Number of Corporation (if k	nown)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Cor</i>	<i>poration</i> adopts the following	ing amendment(s) to
A. If amending name, enter the new name of the co	orporation:		
			The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc." "chartered," "professional association," or the abbre	" or "Co". A professional coi		
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>			
			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)	(X)		
D. If amending the registered agent and/or register		nter the name of the	
new registered agent and/or the new registered	office address:		
Name of New Registered Agent		<u>,</u>	_
	(Florida street address)		_
New Registered Office Address:	(City)	Florida	n Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		e obligations of the position	1.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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 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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
_X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	DIR. FELVINA RENNA	· 133 Salieno St.
Add	Dir. FElvina RENNA President Felvina Renna	Royal Palm Eth
Remove	hasiand havina nerva	FLOUIDA 3341
2) Change		· 133 Saliano St.
Add		Royal Palm Bol, Fr. 3341
Remove 3) Change		
Add		
Remove		
4) Change		
Add		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific) The Correct title should be Albidest not
The correct title produce al Misalut not
director; This was a mistake.
FEling Renna - Pasident.
TEINA KENNA - TOUS alut.
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/K

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this dat partment of State's records.	e will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder actio	n and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s flicient for approval.)
	roved by the shareholders through voting groups. The following stateme each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
byF	ELVINA PENNA	
selecter	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other courted fiduciary by that fiduciary) FEIVING RENNA (Typed or printed name of person signing) President	
	(Title of person signing)	