## P04000155293

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Division of Cor		. •		
NAME OF CORPO	DRATION: Resolutions Health	Alliance, P.A.	·	
DOCUMENT NUM	IBER: P04000155293			
The enclosed Article	es of Amendment and fee are su	bratted for filing.		
Please return all con	respondence concerning this ma	tter to the following:		
	Erin Dawson			
· · ·	· ·	Name of Contact Person		
•	Resolutions Health Allianou			
		Firm/ Company		
•	922 SW Baya Drive	•		
·		Address		
	Lake City, Flanda 32025	T destroy dends		
		City/ State and Zip Code		
Brit	n@chapa.net	•	· ·	
	E-mail address: (to be us	sed for future annual report	notification)	
For firther informati	ion concerning this matter, pleas	se call:		
Erin Dawson		at ( <sup>386</sup>	754-9005	
Nam	e of Contact Person	Arca Co	de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	rtment of State:	
■ \$35 Filing Fee	Certificate of Status	Li\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	1\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address  Amendment Section			Address Iment Section	
	ivision of Corporations		ment Section in of Corporations	
	O. Box 6327	Clifton Building		
Ţ.	allahassee, FL 32314	2661 Executive Center Circle		
	•	Tallaha	assee, FL 32301	

## Articles of Amendment to Articles of Incorporation `o£

Resolutions Health Alliance, P.A.	4			,
(Name	of Corporation as curre	ntly filed with the Florid	a Dept. of State)	
		•		
	(Document Number	or of Corporation (if knows	)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statules, ti	his <i>Rlorida Profit Corpor</i> i	rtion adopts the following amendmen	t(s) to
A. If amending name, enter the new na	ame of the corporation:		•	-
		•	The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associals. Entire new principal office address.	ation "Corp," "Inc," o tion," or the abbreviatio if applicable:	r "Co". A professional	ncorporased" or the abbreviation corporation name must contain the	
(Brincipal office address MUST BE A S	TREET ADDRESS )			
	•	<del></del>		
		· , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	`
C. Enter new mailing address, if appl (Mailing address MAT BE A POST				<b>か</b>
		•		
D. If amending the retristered agent ar new registered agent and/or the ne	ad/or registered office a w registered office addi	address in Florida, enter :	the name of the	
Name of New Registered Agent	Erin Dawson			
Thanks by New Register but the ent	922 SW Baya Drive.		D	
·		a street address)	·	
•	Lake City		32025	
New Registered Office Address:	·	(City)	Florida (Zip Cade)	
•		10.000	Ind. com	
New Registored Agent's Signature, if c I hereby accept the appointment as regis	changing Registered Ag tered agent. I am famili	ent: iar with and accept the ob	ligations of the position.	
<u>.</u>	Stendage of Ne	w Régistered Agent, if cho	melite	
		Tarabatata an estimate à peri	<del></del>	

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

Example:

X Change	PT	John Doe				
X Remove	<u>y</u>	Mike Jones				
X Add	sv	Sally Smith	th .			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address			
1)Change	P	John Evams	8651 SE 128th Avenue			
Add	•		White Springs,			
X Remove	•		Florida 32096			
2) Change	ÝΡ	Michael Yeager	922 SW Baya Drive			
Add	<del></del>		Lake City, Florida 32025			
X Remove						
3) Change	P	Eriu Dawson	922 SW Baya Drive			
X Add	•		Lake City, Florida 32025			
Remove						
<b>A</b> ) <b>A</b>						
4) Change						
Add						
5)Change						
Add	٠					
Remove						
6) Change						
Add		•				
Remove						

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
8-5-16 Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	sta <del>iomeni</del> S):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	•
The amendment(s) was/ware adopted by the board of directors without shareholder action and shareholder action was not required.  The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	. •
August 8th 2016	
Dated	
Signature UXWS	
(By a director, president or other officer - if directors or officers have no	
selected, by an incorporator—if in the hands of a receiver, trustee, or of	er court
appointed fiduciary by that fiduciary)	
enn Dawson	
(Typed or printed name of person signing)	
President/Owner	•
(Title of person signing)	<del></del>