## P05000001198

| (Requestor's Name)                      |       |
|-----------------------------------------|-------|
| (Address)                               |       |
| , ,                                     |       |
| (Address)                               |       |
| (City/State/Zip/Phone #)                |       |
| PICK-UP WAIT                            | MAIL  |
| (Business Entity Name)                  | · · · |
|                                         |       |
| (Document Number)                       |       |
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SHOW ANASSEE, FLORIDA

## **COVER LETTER**

**TO:** Amendment Section
Division of Corporations

| NAME OF COR          | PORATION: S.HEATH,                           | CRNA, INC.                                                                                                                 |                                                                                                     |  |
|----------------------|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|--|
| DOCUMENT NU          | JMBER: <u>P05000001798</u>                   |                                                                                                                            |                                                                                                     |  |
| The enclosed Artic   | cles of Amendment and fee a                  | are submitted for filing.                                                                                                  |                                                                                                     |  |
| Please return all co | orrespondence concerning th                  | is matter to the following:                                                                                                |                                                                                                     |  |
|                      | Sue Heath                                    |                                                                                                                            |                                                                                                     |  |
|                      | (Name                                        | of Contact Person)                                                                                                         |                                                                                                     |  |
|                      | S.HEATH, CRNA, IN                            | C.                                                                                                                         |                                                                                                     |  |
|                      | (Fi                                          | rm/ Company)                                                                                                               | <del></del>                                                                                         |  |
|                      | 18002 Spencer Rd.                            |                                                                                                                            |                                                                                                     |  |
|                      |                                              | (Address)                                                                                                                  |                                                                                                     |  |
|                      | Odessa, FL. 33556                            |                                                                                                                            |                                                                                                     |  |
|                      | (City/S                                      | tate and Zip Code)                                                                                                         |                                                                                                     |  |
| For further inform   | ation concerning this matter,                | please call:                                                                                                               |                                                                                                     |  |
| Sue Heath            |                                              | at ( 813 ) 920-018                                                                                                         | 0                                                                                                   |  |
| (Nam                 | e of Contact Person)                         | (Area Code & Daytime Telephone Number)                                                                                     |                                                                                                     |  |
| Enclosed is a chec   | k for the following amount:                  |                                                                                                                            |                                                                                                     |  |
| □\$35 Filing Fee     | ✓ \$43.75 Filing Fee & Certificate of Status | \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)                                                          | □ \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |  |
| P.O. Box 6           | nt Section<br>Corporations                   | Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301 | rcle                                                                                                |  |

## Articles of Amendment to Articles of Incorporation of

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|                                                       |                                       |                                       | OI .                          |             | 00 JUL 31                            | Al4 (Q+ 00                              |
|-------------------------------------------------------|---------------------------------------|---------------------------------------|-------------------------------|-------------|--------------------------------------|-----------------------------------------|
|                                                       | S.HEATH, CRNA                         | A, INC                                |                               |             | SLUM:                                | <del></del> . 00                        |
|                                                       | S.HEATH, CRNA<br>(Name of corporation | on as current                         | ly filed with the             | e Florida I | Depit of State) S                    | E, FLORIDA                              |
|                                                       | P05000001798                          |                                       |                               |             |                                      | ٠:                                      |
| <del></del>                                           | (Docur                                | ment number                           | of corporation                | (if known   | 1)                                   | <del></del> .                           |
| Pursuant to the proving of the following NEW CORPORAT | amendment(s) to                       | its Articles                          |                               |             | Florida Profit                       | Corporation                             |
| Must contain the word '<br>A professional corporat    | ion must contain the v                | word "charter                         | ed", "profession              | onal associ | ation," or the ab                    | breviation "P.A.")                      |
| AMENDMENTS A<br>and/or Article Title(                 |                                       |                                       |                               |             |                                      | icle Number(s)                          |
| Article III Th                                        | ne purpose for                        | which thi                             | s corporat                    | ion is o    | rganized is                          | •                                       |
| Nurse Ane                                             | esthetist and We                      | ellness Ca                            | are                           |             |                                      |                                         |
| <del></del>                                           |                                       |                                       |                               |             |                                      |                                         |
|                                                       |                                       |                                       | ,                             | ··········  |                                      |                                         |
|                                                       |                                       |                                       | · •                           |             |                                      |                                         |
|                                                       |                                       |                                       | · .w                          |             |                                      |                                         |
|                                                       |                                       | · · · · · · · · · · · · · · · · · · · |                               |             | • . •                                | <del></del>                             |
|                                                       |                                       |                                       |                               |             |                                      |                                         |
|                                                       |                                       |                                       | ****                          |             |                                      |                                         |
|                                                       | (At                                   | ttach addition                        | al pages if nec               | essary)     | ·                                    |                                         |
| f an amendment pro<br>or implementing the             | vides for exchang<br>amendment if no  | e, reclassif<br>t contained           | ication, or ca<br>in the amen | ancellation | on of issued sh<br>self: (if not app | nares, provisior<br>licable, indicate N |
| <u>,</u>                                              |                                       | ·                                     |                               |             |                                      | · · · · · · · · · · · · · · · · · · ·   |
|                                                       |                                       |                                       |                               |             | ,                                    | ····                                    |
|                                                       |                                       |                                       |                               |             |                                      |                                         |

(continued)

| The date of each amendment(s) adoption: July 27, 2006                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Effective date if <u>applicable</u> :                                                                                                                                                                                       |
| (no more than 90 days after amendment file date)                                                                                                                                                                            |
| Adoption of Amendment(s) (CHECK ONE)                                                                                                                                                                                        |
| The amendment(s) was/were approved 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                                                                                                                                          |
| (voting group)                                                                                                                                                                                                              |
| The amendment(s) was/were 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 as shareholder action was not required.                                                                                                   |
| Signature  (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) |
| Sue Heath                                                                                                                                                                                                                   |
| (Typed or printed name of person signing)                                                                                                                                                                                   |
| President                                                                                                                                                                                                                   |
| (Title of person signing)                                                                                                                                                                                                   |

FILING FEE: \$35