# P07000127871

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SECRETARY OF STATE OR 10 RID.

Amend Tlewis 3/19/08

# **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Your Cho	oice Health Care Consultar	nts, Inc.
DOCUMENT NUMBER: P0700012787	71	
The enclosed Articles of Amendment and fee	e are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Trichina Huntley Pierce	ne of Contact Person)	
Pierce Law Firm, LLC		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(Firm/ Company)	
318 West Palmetto Stre	(Address)	· · · · · · · · · · · · · · · · · · ·
Florence, South Carolina (City	29501 / State and Zip Code)	····
For further information concerning this matter	er, please call:	
Trichina Huntley Pierce (Name of Contact Person)	at ( 678 ) 860-12 (Area Code & Daytime	
Enclosed is a check for the following amount	t:	
\$35 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☑ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	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

FILED 2008 MAR 17 AM 11: 02

### YOUR CHOICE HEALTH CARE CONSULTANTS, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

SECRETARY OF STATE

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(Document number of corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

### **NEW CORPORATE NAME (if changing):**

	"company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") ain the word "chartered", "professional association," or the abbreviation "P.A.")
	(OTHER THAN NAME CHANGE) Indicate Article Number(s) ended, added or deleted: (BE SPECIFIC)
ARTICLE #5 TO CHANGE	NUMBER AND NAMES OF OFFICERS/DIRECTORS
TITLE: PRESIDENT	NAME : TRICHINA HUNTLEY PIERCE
	1031 MEADOWOAKS DRIVE
	HARTSVILLE, SC 29550
THERE ARE NO OTHE	ER OFFICERS OR DIRECTORS
ARTICLE#2 TO CHA	NGE PRINICPAL AND MAILING ADDRESS
NEW MAILING ADDR	RESS: 1031 MEADOWOAKS DRIVE
	HARTSVILLE, SC 29550
	(Attach additional pages if necessary)
	schange, reclassification, or cancellation of issued shares, provisions at if not contained in the amendment itself: (if not applicable, indicate N/A
	(continued)

The date of each amendment(s) adoption: March 12, 2008
Effective date if applicable: March 19,2008  (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 and shareholder action was not required.
Signature  (By a director, president or other officet of 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)
TRICHINA HUNTLEY PIERCE
(Typed or printed name of person signing)
INCORPORATOR
(Title of person signing)

**FILING FEE: \$35**