## P0800035911

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| Special Instructions to F | iling Officer:   |           |
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## COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORE   | PORATION: MARTHA BOFIL                      | L & ASSOCIATES P. S. Y   | . CORP   |
|--|---|--|--|
|  | MBER: P08000035911                          |  |  |
| The enclosed Artic   | les of Amendment and fee are su             | bmitted for filing.  |  |
| Please return all co   | rrespondence concerning this ma             | tter to the following:   |  |
|  | MARTHA BOFILE                               |  |  |
|  |   | Name of Contact Person   | 1  |
|  | MARTHA BOFILL & ASSO                        | OCIATES P.S.Y. CORP  |  |
|  | <del> </del>                                | Firm/ Company  |  |
|  | 351 NW 42ND AVE STE 40                      | )]   |  |
|  |   | Address  |  |
|  | MIAMI, FL 33126                             |  |  |
|  | •   | City/ State and Zip Cod  | e  |
|  |   |  |  |
| ini<br>  | oofil@icloud.com                            |  | <u></u>  |
|  | E-man address: (10 De te                    | sed for future annual report                                       | nouncation)  |
| For further informs  | ition concerning this matter, pleas         | se call:   |  |
| MARTHA BOFIL   | L   | 786  | 587-2617   |
| Nar  | me of Contact Person                        | Area Code & Daytime Telephone Number                               |  |
| Enclosed is a checl  | c for the following amount made             | payable to the Florida Depa  | irtment of State   |
| S35 Filing Fee   | □\$43.75 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 |   | Ameno<br>Divisio<br>Cliftor  | Address Iment Section on of Corporations i Building Executive Center Circle            |

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

| (Name of C   | orporation as curren     | tly filed with the Flor | rida Dept. of State)                    |               |               |
|--|--------------------------|-------------------------|---|---------------|---------------|
| P08000035911   |                          |                         | ,                                       |               |               |
|  | (Document Number         | of Corporation (if kno  | wn)                                     |               |               |
| Pursuant to the provisions of section 607.100 its Articles of Incorporation:   | 6, Florida Statutes, thi | s Florida Profit Corpo  | pration adopts the fol                  | llowing ame   | rndment(s) ti |
| A. If amending name, enter the new name  | of the corporation:      |                         |   |               |               |
| DR. MARTHA BOFILL & ASSOCIATES C   | CORP                     |                         |   | The           | e2.2.1        |
| name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designatio word "chartered," "professional association | on "Corp," "Inc," or     | "Co". A professiona     | "incorporated" or<br>l corporation name | the abbrev    | iation        |
| B. Enter new principal office address, if a  | onlicable:               | N/A                     |   |               |               |
| (Principal office address MUST BE A STREET ADDRESS)  |                          |                         |   | <u>(7)</u>    | :20I          |
|  |                          | *****                   |   |               |               |
|  |                          |                         |   |               |               |
| C. Enter new mailing address, if applicab  |                          |                         |   | (7.50<br>- 1. | - :           |
| (Mailing address <u>MAY BE A POST OF I</u>   | FICE BOX)                |                         | · · · · · · · · · · · · · · · · · · ·   | 7.C3          |               |
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|  |                          |                         |   | 1 1-4<br>1 m  | <del>-</del>  |
| D. If amending the registered agent and/or   | r registered office add  | fress in Florida, ente  | r the name of the                       |               |               |
| new registered agent and/or the new re   | gistered office addre    | 581                     |   |               |               |
| Name of New Registered Agent No.   | Λ                        |                         |   |               |               |
|  |                          |                         |   |               |               |
| _  | (Florida s               | (reet address)          | · · · · · · · · · · · · · · · · · · ·   | <del></del>   |               |
| New Registered Office Address:   |                          |                         | , Florida                               |               |               |
|  |                          | eCity)                  |   | (Zip Code)    |               |
|  |                          | •                       |   |               |               |
| New Registered Agent's Signature, if change  | ging Registered Agen     | t·                      |   |               |               |
| I hereby accept the appointment as registered  | l agent. – Lam familiar  | with and accept the o   | bligations of the posi                  | tion          |               |
|  |                          |                         |   |               |               |
|  |                          |                         |   |               |               |
|  | Signature of New         | Registered Agent, if cl | ianging                                 |               |               |
|  | ~· ~                     |                         | V) 4"                                   |               |               |

| Address of each Officer Attach additional sheets Please note the officer/d P = President: V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted i change, Mike Jones le Mike Jones, V as Remove Example: | and/or L s, if neces, irector tit Presiden = Chief er, Direct d in the fo aves the c e, and Sai | Director being added: sary) le by the first letter of the | office title:<br>etary: D= Director: TR:<br>officer/director holds mo<br>ly John Doe is listed as t | cer/director being removed and title, name, and  = Trustee; C = Chairman or Clerk; CEO + Chief    ore than one title, list the first letter of each office    the PST and Mike Jones is listed as the V. There is ese should be noted as John Doe, PT as a Change, |
|---|---|---|---|--|
| X Change  | PT  | <u>Iohn Doc</u>   |   |  |
| X Remove  | <u>V</u>  | Mike Jones  |   |  |
| X Add   | <u>sv</u>   | Sally Smith   |   |  |
| Type of Action Check One)   | <u>Title</u>  | <u>Name</u>   |   | <u>Addres</u> s  |
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| <mark>If amending or add</mark><br>Attach <i>additional sh</i> | ing additional Articets, if necessary). | cles, enter change<br>(Be specific) | (s) here:           |                                       |           |             |
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| lf an amendment p  | rovides for an excl                     | nange, reclassifica                 | tion, or cancellati | on of issued share                    | <u>s,</u> |             |
| provisions for imp   | olementing the ame                      | endment if not con                  | tained in the ame   | ndment itself:                        |           |             |
| иј погарриса   | ble, indicate N/A)                      |                                     |                     |                                       |           |             |
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| Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.  Adoption of Amendment(s) (CHECK ONE)  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  | *                                     | 06/28/2019   |                     |
|--|---------------------------------------|--|---------------------|
| Effective date if applicable:    In more than 90 days after amendment file date)   Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.   Adoption of Amendment(s)   |                                       | doption:   | , if other than the |
| Effective date if applicable:    Into more than 90 days after amendment file date)   |                                       |  |                     |
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| 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  | Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date)                               |                     |
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| 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   | Adoption of Amendment(s)              | ( <u>CHECK ONE</u> )   |                     |
| "The number of votes cast for the amendment(s) was/were sufficient for approval  by  |                                       |  |                     |
| 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.    O6/28/2019     Dated  |                                       |  |                     |
| 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    O6/28/2019     Dated   O8/28/2019     O8 |                                       |  |                     |
| 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    O6/28/2019     Dated   O8/28/2019     O8 | by                                    | <u></u>  |                     |
| 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    O6/28/2019     Dated   O6/28/2019     O8/28/2019     O8 | •                                     | (voting group)   |                     |
| Signature  O6/28/2019  Dated  Signature  OBy 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)  MARTHA BOFILL  (Typed or printed name of person signing)  PRESIDENT   | ☐ The amendment(s) was/were add       |  |                     |
| Signature    No find   |                                       | opted by the incorporators without shareholder action and shareholder          |                     |
| 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)  MARTHA BOFILL  (Typed or printed name of person signing)  PRESIDENT   |                                       |  |                     |
| (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)  MARTHA BOFILL  (Typed or printed name of person signing)  PRESIDENT  | Signature                             | Water Profeel  |                     |
| (Typed or printed name of person signing) PRESIDENT  | (By a d<br>selecte                    | d. by an incorporator - if in the hands of a receiver, trustee, or other court |                     |
| PRESIDENT  |                                       | MARTHA BOFILL  |                     |
| · <del>-</del>   |                                       | (Typed or printed name of person signing)                                      |                     |
| (Title of person signing)  |                                       | PRESIDENT  |                     |
| True of person signing)  |                                       | (Title of person signing)  |                     |