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SECRETARY OF STATE
TAIL AHASSEE, FLORID

N.C. C.COULLIETTE JAN 1 5 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SANDTON HE	ALTH CARE SERVICES "INC"
DOCUMENT NUMBER: POSO	00074164
The enclosed Articles of Correction and fee	
Please return all correspondence concerning	this matter to the following:
JOHN NG E	REM
SANDTON HEALTH	CARE STRVICES "INC"
10539 PARKCREST	DRIVE
TAMPA FLORIS City/State and Zip Code	M 33624
Sandton 2010@G	J
For further information concerning this mat	ter, please call:
TOHN NGEREN	at (813) 385-1623 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	nt:
\$35.00 Filing Fee	\$43.75 Filing Fee & Certificate of Status
\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee, Certificate of Status & Certified Copy
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 Circle Tallahassee, FL 32301

Articles of Amendment

Ai	rticles of Incorpo of	oration			
SANATON HE	ALTH C	ARE S	ERVICE	34112	$\supset^{J/}$
(Name of Corporation as curren				•	_
000304	74164				
(Document Numb	er of Corporation	(if known)			
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes,	this <i>Florida Pi</i>	eces.	ELVE DINTE	-
A. If amending name, enter the new name of t			01-	18-10	_
SANDTON ENTE	P PRISES	UN	C^{11}	The	new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "profe	e word "corpora lesignation "Corp,	tion," "compa ""Inc," or "C	ny," or "incor Co". A professi	onal corpor	r the cation
B. Enter new principal office address, if applic (Principal office address MUST BE A STREET		NA			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<i>E BOX</i>)	N1	A	10 JAN IL PH ZE	
D. If amending the registered agent and/or renew registered agent and/or the new registered	gistered office add ered office addres	iress in Florid s:	a, enter the nan	ne of the	,
Name of New Registered Agent:		NA	 		
New Registered Office Address:	(Florida :	street address)	, Florida_		
-	(City)		, Florida_ (Zip Code)		-
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag			ot the obligation	s of the posi	tion.

Signature of New Registered Agent, if changing

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)

<u>Tit</u>	<u>le</u>	Name	Address	Address		
			NA			☐ Add ☐ Remove
	•					☐ Add ☐ Remove
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			☐ Add ☐ Remove
E.]	If amending attach addit	g or adding add tional sheets, if n	itional Articles, ente ecessary). (Be spec	er change(s) here:	N	[A
F.	provisions	ndment provides for implementi applicable, indica	ng the amendment i	eclassification, or can f not contained in the	cellation of issistance amendment in	ued shares, tself:

The date of each amendment(s) adoption: \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Effective date if applicable: (date of adoption is required) (no more than 90 days after amendment file date)
(no more than 90 days after amendment file date)
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" (voting group)
(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.
Dated 1-11-2015
Signature John Mocen
(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)
JOHN NEEREM
(Typed or printed name of person signing)
CEO
(Title of person signing)