P090000 16292

(Requestor's Name)	
(Address)	
(Address)	Ò
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	R. WHITE

Office Use Only



800338716768

01/09/20--01007--026 **85.00

FEB 0 4 2020

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: Essential Health C	options. Inc	
DOCUMENT NUM	P09000016292		
The enclosed Article	es of Amendment and fee are su	abmitted for filing.	
Please return all cor	respondence concerning this ma	atter to the following:	
	Jenny Lopez		
		Name of Contact Person	1
	Essential Health Options, Inc	3	
		Firm/ Company	
	3590 W 92 Place	7 mm Company	
		Address	<u>-</u>
	Hialeah, FL 33018		
		City/ State and Zip Cod	e
ilo	pez@sflhm.com		
<u></u>	-	sed for future annual report	notification)
		•	,
For further informat	ion concerning this matter, plea	se call:	
Jenny Lopez		at (586-0661 de & Daytime Telephone Number
Nam	e of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 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)
A D P.	lailing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

Essential Health Options, Inc	2020 J 9 P.4 3: 11
(Name of Corporation	on as currently filed with the Florida Dept. of State)
P09000016292	
(Docum	nent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO D. If amending the registered agent and/or register	red office address in Florida, enter the name of the
new registered agent and/or the new registered	
Name of New Registered Agent Jenny Lope	<u>z</u>
	(Florida street address)
New Registered Office Address:	, Florida
	tistered Agent: I am familiar with and accept the obligations of the position, ature 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)

Please note the officer/director 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. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	William Dopico	3590 W 92 Place
Adđ			Hialeah. FL 33018
X Remove			
2) Change			
Add			
Remove			<u>-</u>
3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ticles, enter change(s) here: (Be specific)	
· · · · · · · · · · · · · · · · · · ·		
	<u> </u>	
<u> </u>		
		_
-		_
	ranga madagaifiantian un numeritudis nu Silvinia (S. 1881)	
an amendment provides for an excha	iange, reclassification, or cancenation of issued shares,	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
an amendment provides for an exchaprovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
an amendment provides for an exchiprovisions for implementing the amen (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:	

The date of each amendment(s) ad	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more man so days after and nament file date)	
Note: If the date inserted in this be document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	t
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	<u></u> ,	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
January 3	rd-2020	
Dated		
Signature	MAR	
	rettor, president or other officer - if directors or officers have not been	
	I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Jenny Lopez	
	(Typed or printed name of person signing)	-
	President	
	(Title of person signing)	