P09000018048

(Red	questor's Name)	
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COVER LETTER

TO: Amendment Section Solution of Corporations

NAME OF CORP	ORATION: Carib Medical and	Wellness Center Inc.	
	MBER: P09000018048		
The enclosed Articl	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	Jean Russell		
		Name of Contact Person	1
	carib medical and wellness co	enter Inc.	
		Firm/ Company	
	· · · · · · · · · · · · · · · · · · ·	Address	
	38 NE 20. Ave	33060	
		City/ State and Zip Cod	e
car	ibmedical28@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informat	ion concerning this matter, pleas	se call:	
Jean Russell		561	
Nam	e of Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	843.75 Filing Fee & Sertificate 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)
<u>M</u>	lailing Address		Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

Carib medical and wellness center Inc.	2019 FEB - 7 PM 12: 15
(Name of Corporation as currently	filed with the Florida Dept. of State)
P09000018048	TALLAMASSERTATE
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Gword "chartered," "professional association," or the abbreviation ".	i," "company," or fincorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	38 NE 20th Avenue
(Mailing address MAY BE A POST OFFICE BOX)	Pompano Beach, Florida 33060
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	i\/#
	7
(Florida stre	eet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Signature of New Ro	egistered 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 Doc	
X Remove	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	v	David Russell	211 NW 119 Drive Coral Springs F
Add			33071
X Remove			
2) Change	S	Patsie Bentley	211 NW 119 Dr. Coral Springs Fl 3
Add			33071
X Remove			
3) Change	S	Brenda Layne ?	8900 W. Sample Rd Coral Springs
Add			33065
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
Due to discrepensies in our mailing address showing as my home address I wish to have all and every correspondent	ndence sent to
38 NE 20TH. Avenue Pompano Beach Florida. 33060 In addition the only person that should be shown on	the corporation
is Jean Russell everyone else should be removed.	
· · · · · · · · · · · · · · · · · · ·	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	WA.
	1
	

•	02/07/2019	
The date of each amendment(s)	adoption:	, if other than th
date this document was signed.	VAT 100 4 0	
(): 	2/07/2019	
	(no more than 90 days after amendi	ment file date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing Department of State's records.	g requirements, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were aby the shareholders was/were	dopted by the shareholders. The number of votes ca sufficient for approval.	ist for the amendment(s)
	pproved by the shareholders through voting groups. For each voting group entitled to vote separately on t	
"The number of votes ca	st for the amendment(s) was/were sufficient for appr	roval
by	(voting group)	"`
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholde	r action and shareholder
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder acti	ion and shareholder
02/06/20 Dated	19 N 1	
	director, president or other officer - if directors or	officers have not been
	ited, by an incorporator - if in the hands of a receive	r, trustee, or other court
appo	inted fiduciary by that fiduciary)	
	Jean Russell	
	(Typed or printed name of person sign	ing)
	President	
	(Title of person signing)	