P1400018184

Office Use Only



400435949164

09/05/24--01014--018 **43.75

COTTARY OF STATE

The second of the property of the second of

FILED

COVER LETTER

TO: Amendment Section Division of Corporations

IOR THERAPY INC	
abmitted for filing.	
atter to the following:	
MELBA CARBONE MAR	RTINEZ
Name of Contact Person	n
CM DEHAVIOR THERAI	PY INC
Firm/ Company	
1521 SW 81 ST TERRACE	;
Address	
MIAMI, FL 33173	
City/ State and Zip Cod	e
diamelba@yahoo.com	
sed for future annual report	notification)
ese call;	
. 786 at (de & Daytime Telephone Number
Area Co	de & Daytime Telephone Number
payable to the Florida Depa	artment of State:
☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Address Iment Section
Divisio	on of Corporations
· -	entre of Tallahassee N. Monroe Street, Suite 810
	Name of Contact Person DCM DEHAVIOR THERAI Firm/ Company 1521 SW 81 ST TERRACH Address MIAMI, FL 33173 City/ State and Zip Codediamelba@yahoo.com used for future annual report ase call: 2 at (786 Area Co payable to the Florida Dep S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) Street Ameno Divisio The C

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

DCM BEHAVIOR THERAPY INC.

12	CM BEHAVIOR THE	RAPT INC	
(Name o	of Corporation as curr	ently filed with the Florid	la Dept. of State)
P	14000068184		
	(Document Numb	er of Corporation (if know	n)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, t	this Florida Profit Corpor	ation adopts the following amendment(s
A. If amending name, enter the new na	ame of the corporation	<u>ı:</u>	
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	.orp," "Inc," or "Co"	. A professional corpor	orated" or the abbreviation "Corp.,"
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		N/A	
			2021 FAIL
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	18EP -5
D. If amending the registered agent ar new registered agent and/or the new	w registered office add	ress:	the name of the state of the st
Name of New Registered Agent	DIAMELBA CARBO	ONE MARTINEZ	·
	11521 SW 81 ST TER	RACE	
	(Florid	la street address)	
New Registered Office Address:	MIAMI		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ag	gent:	
I hereby accept the appointment as regist	tered agent. I am famil	iar with and accept the ob.	ligations of the position.
	Al	Tail	
	Signature of Ne	XXY pw Registered Agent, if cha	nging

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

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: <u>X</u> Change	<u>PT</u>	John Doe	
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
1) X Change	VP	CARLOS GARCES	11521 SW 81ST TERRACE
Add			MIAMI, FL 33173
Remove			
2) Change	P	DIAMELBA CARBONE MARTINE	11521 SW 81ST TERRACE
X Add			MIAMI, FL 33173
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			7
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
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)
ARTICLE IV SHARES: CARLOS GARCES, WILL HAVE 50% OF SHARES (\$1.00 PER 50 SHARES)
ARTICLE IV SHARES: DIAMELBA CARBONE MARTINEZ, WILL HAVE 50% OF SHARES (\$ 1.00 PER 50 SHAI
ARTICLETY SHARES, DIAMELDA CARDONE MARTINEZ, WILL HAVE SUM OF SHARES (\$ 1.00 FER SUSHAI

The date of eac	ch amendment(s) ac	08/22/2024 option:	, if other than the
date this docum			
	_	08/22/2024	
Effective date	if applicable:		after amendment file date)
		(no more than 90 days	after amendment file date)
		ock does not meet the applicable s partment of State's records.	tatutory filing requirements, this date will not be listed as th
Adoption of A	mendment(s)	(CHECK ONE)	
The amendar action was n	nent(s) was/were ado ot required.	oted by the incorporators, or board of	of directors without shareholder action and shareholder
	nent(s) was/were ado holders was/were su		per of votes cast for the amendment(s)
must be sep	arately provided for	each voting group entitled to vote so	•
		or the amendment(s) was/were suff	·
by		(voting group)	<u>.</u>
	08/22 Dated	/2024	
		(Trans	
	Signature		
		ector, president or other officer – if	directors or officers have not been
			s of a receiver, trustee, or other court
	appoint	d fiduciary by that fiduciary)	
		CARLOS GARCES	
		(Typed or printed name of	of person signing)
		PRESIDENT	
		(Title of person signing)	