P14000099369

(8)	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
	ty/State/Zip/Phone #)	1
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Name)	
(D)	and the second	<u>-</u>
(Di	ocument Number)	
Certified Copies	Certificates of	of Status
Special Instructions to Fili	ing Officer:	

Office Use Only



300419944733

NIC Amena

2023 DEC 11 PH 2: 81

A. RAILISEY
DEC 10, 2023

CT CORP

(850) 656- 4724 3558 lakesore Drive Tallahassee, FL 32312

12/11/2023

Date:

wil DW

		Acc#120160000072	
Name:	TRI COUNTY	PREMIER HEARIN	G SERVICES INC.
Document #:			
Order #:	15271356		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🚺	Certified: Plain: COGS: [V	Email Address for Annual Report Notifications:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	43.75	

Thank you!

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TRI COUNTY PRE	MIER HEARING SERVI	CES INC.
DOCUMENT NUM	BER: P14000099369		
	s of Amendment and fee are sub-	mitted for filing.	
Please return all corre	espondence concerning this matt	er to the following:	
	Carol O'Connell		
		Name of Contact Person	, , , , , , , , , , , , , , , , , , ,
	Dykema Gossett PLLC	•	
	Dykema dossen i me	Firm/ Company	
	10.0 117 1 10.1 11.0 0.1 1.0 220	•	
	10 S. Wacker Drive, Suite 230		
		Address	
	Chicago, IL 60606		
		City/ State and Zip Code	
	pkhirbat1@yahoo.com		
	E-mail address: (to be use	ed for future annual report	notification)
For further informati	on concerning this matter, please		627-2303
	e of Contact Person	at (Area Coo) 627-2303 de & Daytime Telephone Number
	for the following amount made p		
S35 Filing Fee	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

2023 DEC 11 AM 11: 31

TRI COUNTY PREMIER HEARING SE			
(Name o	f Corporation as currently	filed with the Florida De	pt. of State)
P14000099369			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	1006. Florida Statutes, this F	lorida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
Not My Problem Anymore Inc.			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co". A	ompany," or "incorporate professional corporation	d" or the abbreviation "Corp.," name must contain the word
B. Enter new principal office address,	if annlicable:	n/a	
(Principal office address MUST BE A S	TREET ADDRESS)		
C. P	icable:		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)	<u>OFFICE BOX</u>)	n/a 	
			<u></u>
			
D. If amending the registered agent an new registered agent and/or the new	nd/or registered office add	ress in Florida, enter the	name of the
new registered agent and/or the nev	n/a	<u>·</u>	
Name of New Registered Agent			
			<u> </u>
	(Florida str	eet address)	
New Registered Office Address:	n/a		, Florida
		(City)	(Zip Code)
	Danistaged Scant		
New Registered Agent's Signature, if of I hereby accept the appointment as regis	tered agent. I am familiar	$rac{\cdot}{\cdot}$ with and accept the obliga	tions of the position.
,			
	- CV: 1	Desirement to sut (Calcana)	
	Signature of New F	Registered Agent, if changi	ⁿ 8
Check if applicable			
☐ The amendment(s) is/are being filed	pursuant to s. 607.0120 (11)	(e), r.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)

Example:

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.

X Change	<u>PT</u>	<u>John Doe</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
1) Change		n/a	
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

					
					<u> </u>
					
					
			<u> </u>		
		<u> </u>			
					<u></u>
-					
				<u>.</u>	
			· -	_ _	
	<u> </u>				
				<u>-</u>	
					<u></u>
			· ·		
. <u></u>					
	rovides for an exch	ange, reclassificat	tion, or cancellation	of issued shares,	
f an amendment ni	TOTAL STOTE OF THE CALL	ndment if not con	tained in the amen	dment itself:	
f an amendment propositions for imp	lementing the ame		•		
f an amendment provisions for imp (if not applicab	dementing the ame ole, indicate N/A)				
f an amendment provisions for imp (if not applicab	dementing the ame ole, indicate N/A)				
f an amendment provisions for imp (if not applicab	dementing the ame ole, indicate N/A)				
f an amendment provisions for imp (if not applicab	dementing the ame ole, indicate N/A)				
f an amendment provisions for imp (if not applicab	dementing the ame ole, indicate N/A)				
f <u>an amendment p</u> provision <u>s for imp</u> (if not applicab	dementing the ame				
f an amendment provisions for imp (if not applicab	lementing the ame				
f <u>an amendment p</u> provisions for imp (if not applicab	dementing the ame				
f an amendment provisions for imp (if not applicab	dementing the ame				
f an amendment provisions for imp (if not applicab	dementing the ame				
f an amendment provisions for imp (if not applicab	dementing the ame				
f an amendment provisions for imp (if not applicab	dementing the ame				
f an amendment provisions for imp (if not applicab	dementing the ame				

	n/a	ic asker show the
The date of each amendment(s) ado	ption:	, if other than the
date this document was signed.		
n/a Effective date <u>if applicable</u> :		
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department	ck does not meet the applicable statutory filing requirement artment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adop action was not required.	ed by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amicient for approval.	endment(s)
must be separately provided for e	oved by the shareholders through voting groups. The following ach voting group entitled to vote separately on the amendment	ng statement ut(s):
	or the amendment(s) was/were sufficient for approval	
bv ^{n/a}		
<u> </u>	(voting group)	
December _ Dated	_8 2023	
Signature Pa	rvesh Khirbat	
(By a dir selected	ector, president or other officer – if directors or officers have by an incorporator – if in the hands of a receiver, trustee, or d fiduciary by that fiduciary)	not been other court
	arvesh Khirbat	
-	(Typed or printed name of person signing)	
	Director	

(Title of person signing)