## P15000004775

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

August 24, 2016

LISA R. HUBERT / NET HEALTH AFFILIATES INC 8520 US HWY 1, G-7 MICCO, FL 32976 US

SUBJECT: NET HEALTH AFFILIATES, INC.

Ref. Number: P15000004775

We have received your document for NET HEALTH AFFILIATES, INC.. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 316A00018004

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Amendment Section Division of Corporations DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person City/ State and Zip Code For further information concerning this matter, please call: Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Street Address

Clifton Building

Amendment Section

**Division of Corporations** 

2661 Executive Center Circle Tallahassee, FL 32301

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

## **Articles of Amendment**

to

Articles of Incorporation

FILEB SEURETARY OF STATE DIVISION OF CERPORATION
TATISTUR OF CERTIFICATIONS

ol	UNVISION OF CORN WRATION
(Name of Corporation as current	DATE (CO C2016 AUG 24 PM-1: 36
P15000	00 4775
(Document Number of	f 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:	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	'Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	4700 N. State Rd 7
	Lauderdale Lakes FL33319
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4700 N State Rd 7
•	Lauderdale Lakes FL 33319
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	
Name of New Registered Agent Bruce (	Soldberg
20533 Bro	SCAYNO BRID #437
New Registered Office Address: QVCDHLT	(City) , Florida 33180 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familial	
Signature of New I	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 sheet's, 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				should be noted as some poet, i i as a change,
Example: X Change	<u>PT</u>	John D	<u>oe</u>	•
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>\$V</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	PT9!	D	LionRHubert	8500 USHW4167
Add				micco FL 32976
Remove				
2) Change	P		Bruce Goldberg	20533 BISCOURCE Blud
Add				Quentura FZ 33180 #43
Remove			, A.I.	
3) Change	D	_	Kareem McLean	18488 NW 9 CT
Add				Pembroke Pinas FL
Remove				5306
4) Change	<del></del>	_		
Add				
Remove				
5) Change	-	<del></del>		
Add				
Remove				
6) Change	_	_		
Add				
Pamova				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	,
all corp stock & office supplies books sold to Bruce Goldberg	Aurniture as of
09-01-2010	7
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)	

The date of each amendment(s) ac	loption:	09-01-	2014		f other than the
date this document was signed.  Effective date if applicable:		09-01	-2014	FIL SECRETARY SIVISION OF CO	ELV OF STATE PREMEATION
	(n	no more than 90 days af	lter amendment file dat	2016 AUG 24	PH -1: 36
Note: If the date inserted in this b document's effective date on the De			utory filing requirement	nts, this date will not	be listed as the
Adoption of Amendment(s)	(CHEC	K ONE)			
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shar	reholders. The number royal.	of votes east for the an	nendment(s)	
☐ The amendment(s) was/were app must be separately provided for					
"The number of votes cast t	for the amendmo	ent(s) was/were sufficie	ent for approval		
by	(voting				
	(voting)	group)			
The amendment(s) was/were adopaction was not required.	pted by the boar	rd of directors without s	shareholder action and	shareholder	
☐ The amendment(s) was/were adopaction was not required.	pted by the inco	orporators without share	holder action and share	eholder	
DatedO	9-01-8	3014			
Signature	Ausa	Cor other officer - if di	J.	unt boon	
selected	, by an incorpor	rator – if in the hands of			
appointe	ed fiduciary by t	that fiduciary)			
-		CR HUDO	erson signing)		
		P			
_		(Title of person	signing)		