

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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(((H22000140952 3)))



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 COR AMND/RESTATE/CORRECT OR O/D RESIGN

 BETTER LIFE MEDICAL SERVICES, CORP.

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 0

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 0

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 01

\$35.00

2022 APR 19 AH 8: 52

Electronic Filing Menu Corporate Filing Menu

Estimated Charge

4/20/2023

19, 2022 13:17 (01C-04) From: +17867892416 (Document Pi	anety	10, 116500176560
Articles of	Amendment	(((H22000140952_3)))
Articles of 1	to ncorporation	2022 APR 19 AM 8: 52
of BETTER LIFE MEDICAL SERVICES, CORP		EELINE STATE
(Name of Corporation as curren	tly filed with the Flor	ida Dept. of State
P15000014591		
(Document Number	of Corporation (if know	wn)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A	A professional corpo	
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1490 W 49TH PL	
	SUITE 202/204/506	
	HIALEAH, FL 33	3012
C Fater new mailing address, if applicable		

(Mailing address MAY BE A POST OFFICE BOX)

1490 W 49TH PL

SUITE 202/204/506

HIALEAH, FL 33012

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent	AYMEE CABALLERO	
	1490 W 49TH PL SUITE 202/204/506	
	(Florida street address)	
<u>New Registered Office Address:</u>	HIALEAH	, Florida
	(City)	(Zip Code)

<u>New Registered Agent's Signature, if changing Registered Agent:</u> I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Aymee Caballero Signature of New Registered Agent, if changing

Check if applicable

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

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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	PI	John Doc	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	Address
I) X Change	PRES	AYMEE CABALLERO 50%	1490 W 49TH PL
Add			SUITE 202/204/506
 			HIALEAH, FL 33012
2) X Change	VP	ROBERTA ASCENSION 50%	1490 W 49TH PL
Add			SUITE 202/204/506
Remove 3) Change			HIALEAH, FL 33012
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			<u> </u>
Add			
Remove			·····
6) Change			
Add			
Remove			<u> </u>

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E.	If amending or adding additional Artic	cles, enter change(s) here:
	(Attach additional sheets, if necessary).	(Be specific)

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)

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To: +18506176380 ■ 5 of (((H22000140952 3)))

The date of each amendment(s) adoption:		, if other than the
date this document was signed.	1	
Effective data if emplicables		

Effective date <u>if applicable</u>:

(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)

(CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- □ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- □ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by ____

(voting group)

4-19-2022 Dated

Aymee Caballero

Signature

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

AYMEE CABALLERO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)