

P16000013255

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H21000325006 3)))



H210003250063ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
HEALING HANDS THERAPY CENTER INC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

2021 AUG 31 PM 12:58

FILED

SEP 01 2021
S. PRATHEP

Articles of Amendment
to
Articles of Incorporation
of

Healing Hands Therapy Center Inc

Florida Document Number: P1600000132SS

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

Change All Address

8660 Wot Flagler St

Miami FL 33144

These articles of amendment were adopted on

8/30/21

The corporation has only one group of voting stock. This amendment was approved by the shareholders and the number of votes cast for amendment was sufficient for approval.

Signature

Stacy L. (LAWER CP)

Printed Name and Title

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

FILED
2021 AUG 31 PM 12:58
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA