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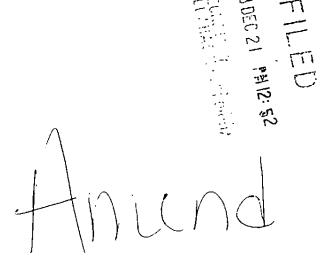
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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: LEADING HEALT	HCARE SOLUTIONS, II	NC.
DOCUMENT NUMB	P16000074682		
The enclosed Articles of	f Amendment and fee are sul	omitted for filing.	
Please return all corresp	oondence concerning this mat	ter to the following:	
	ADAM ZALKA		
-	···	Name of Contact Perso	n
1	LEADING HEALTHCARE S	SOLUTIONS INC	
-		Firm/ Company	
	1600 S FEDERAL HWY STE	• •	
-		Address	
1	POMPANO BEACH, FL 330	62	
-		City/ State and Zip Cod	c
ADAN	1@ZALKACPA.COM		
		ed for future annual report	notification)
For further information	concerning this matter, please	e call:	
ADAM ZALKA		954 at (de & Daytime Telephone Number
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	ayable to the Florida Depa	artment of State:
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LEADING HEALTHCARE SOLUTIONS INC.

(Name of Corporation as currently	filed with the Florida Dept. of State)
P16000074682	med with the violida pept, of State
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	orida 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 "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	s in Florida, enter the name of the
Name of New Registered Agent	2
(Florida stree	address)
New Registered Office Address: (C	ity) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position. istered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a 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 = Ch. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each offi 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 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 Chang Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>РТ</u>	John Do		
_				
X Remove	V	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	CEO	_	MARK TRIBBLE	4061 NW 7TH AVE
X Add				POMPANO BEACH, FL 33064
Remove				
2) Change		_		
Add				
Remove				
3) Change		<u></u>		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
		_	.	
Add				
Remove				
6) Change		_		
, Add		-		
Remove				

	(Be specific)
	.
	
<u> </u>	
	ange reclassification or cancellation of issued chares
f an amendment provides for an exch	ange, reciassification, or cancenation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
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f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:
provisions for implementing the amer	ndment if not contained in the amendment itself:

The date of each amendment(DECEMBER 18, 2018	, if other than the
date this document was signed.		
	DECEMBER 18, 2018	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	nis block does not meet the applicable statutory filing requirements, e Department of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/we	adopted by the shareholders. The number of votes cast for the amen re sufficient for approval.	idment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
	cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and sha	ıreholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	older
DECE. Dated	MBER 18, 2018	
Signature	Macini Dupus	.
	a director, president or other officer - if directors or officers have no	
	ected, by an incorporator – if in the hands of a receiver, trustee, or otherointed fiduciary by that fiduciary)	ner court
	NAOMI DEJESUS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	