## P16000096291

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SECRETARY OF STATE AND INVISION OF CORPORATION

C WCHAIR

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: America's Health A	Advisors Inc		
DOCUMENT NUME	P1600006201			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all correspondence concerning this matter to the following:				
	Monica Reed			
		Name of Contact Person	l	
	America's Health Advisors Inc			
	,	Firm/ Company		
6245 Powerline Road, Suite 201A				
		Address		
	Fort Lauderdale, FL 33309			
		City/ State and Zip Code	)	
bookk	eeping@nationwidehealthadv	visors.com		
	E-mail address: (to be us	sed for future annual report	notification)	
For further information	n concerning this matter, pleas	ee call:		
Monica Reed		at ( <sup>305</sup>	987-9009	
Name o	of Contact Person		le & Daytime Telephone Number	
Enclosed is a check for	the following amount made I	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	□\$43.75 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)	
Ame Divis P.O.	ling Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amendi Division Clifton 2661 E	Address ment Section n of Corporations Building secutive Center Circle ssee, FL 32301	

## Articles of Amendment to Articles of Incorporation of

America's Health Advisors Inc (Name of Corporation as currently filed with the Florida Dept. of State) P16000096291 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: America's Health Advisors Insurance Agency Inc name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 6245 Powerline Road B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Suite 201A Fort Lauderdale, FL 33309 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Monica Reed Name of New Registered Agent 390 NE 51st Street (Florida street address) Fort Lauderdale New Registered Office Address: (City) 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

## 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: X Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
	_	-	
Add			
Remove			
6) Change			
Add			
Pamova			

E. <u>If amending or adding additional Articles</u> , enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Change name of incorporation.
Update business address.
Update registered agent.
•
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)  NA

The date of each amendmen date this document was signed		, if other than the
-	04/06/17	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this che Department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendment ere sufficient for approval.	(s)
	re approved by the shareholders through voting groups. The following statened for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.  The amendment(s) was/we	re adopted by the board of directors without shareholder action and shareholder.  re adopted by the incorporators without shareholder action and shareholder	der
action was not required.		
04/00 Dated	5/17	
Signature _		
(E	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other compointed fiduciary by that fiduciary)	nrt
	Evan Jaxtheimer	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	