# PIF (000005521

| (Duranted Name)                         |           |
|---|-----------|
| (Requestor's Name)                      |           |
| (Address)                               |           |
| (Address)                               |           |
| (City/State/Zip/Phone #)                |           |
| PICK-UP WAIT                            | MAIL MAIL |
| (Business Entity Name)                  |           |
| (Document Number)                       |           |
| Certified Copies Certificates of        | Status    |
| Special Instructions to Filing Officer: |           |
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPO                              | DRATION: INSTA HEALTH  | CORP.  |  |  |  |  |
|--|--|--|--|--|--|--|
| DOCUMENT NUN                               | IBER: P17000005529   |  |  |  |  |  |
|  | es of Amendment and fee are su   | bmitted for filing.  |  |  |  |  |
| Please return all cor                      | respondence concerning this ma   | tter to the following:   |  |  |  |  |
|  | Miguel A. Rodriguez Sardina  | ıs   |  |  |  |  |
|  | Name of Contact Person   |  |  |  |  |  |
|  | INSTA HEALTH CORP.   |  |  |  |  |  |
|  |  | Firm/ Company  |  |  |  |  |
|  | 2742 SW 8 ST, #11  |  |  |  |  |  |
|  | Address  |  |  |  |  |  |
|  | Miami, FL 33135  |  |  |  |  |  |
|  | City/ State and Zip Code   |  |  |  |  |  |
|  | Instahealthelinic@gmail.com  |  |  |  |  |  |
|  |  | sed for future annual report                                     | natification)  |  |  |  |
| For further informat<br>Miguel A. Rodrigue | ion concerning this matter, plea<br>z Sardinas   |  | 828-7758   |  |  |  |
| Nam  | e of Contact Person  | Area Co  | ) 828-7758<br>le & Daytime Telephone Number  |  |  |  |
| Enclosed is a check                        | for the following amount made  |  |  |  |  |  |
| S35 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) |  |  |  |
| Mailing Address                            |  |  | Address  |  |  |  |
|  | Amendment Section Amendment Section  Division of Corporations Division of Corporations |  |  |  |  |  |
| Division of Corporations<br>P.O. Box 6327  |  |  | The Centre of Tallahassee  |  |  |  |
| Tallahassee, FL 32314                      |  | 2415 N. Monroe Street, Suite 810                                 |  |  |  |  |

Tallahassee, FL 32303

# ARTICLES OF AMENDMENT

TO

#### ARTICLES OF INCORPORATION

**OF** 

# INSTA HEALTH CORP.

INSTA HEALTH CORP., Pursuant to the provisions of section 607.1006, of the Florida Statutes, this Florida profit corporation hereby adopts the following Articles of Amendment to its Articles of Incorporation:

- 1. The date of the of the filing of the Articles of Incorporation was January 17, 2017, and assigned document number P17000005529.
  - 2. The following Amendments to the Articles of Incorporation were adopted by the corporation:

## **CHANGE OF DIRECTORS/OFFICERS:**

Delete: Eulogio E. Benitez as President

Directors shall now read as follows:

| Name                          | Title          | Address                              | Action |
|-------------------------------|----------------|--------------------------------------|--------|
| Rodriguez Sardinas, Miguel A. | President      | 2742 SW 8 ST, #11<br>Miami, FL 33135 | Add    |
| Benitez, Eulogio E.           | Vice President | 2742 SW 8 ST, #11<br>Miami, FL 33135 | Remain |

## CHANGE OF REGISTERED AGENT/REGISTERED OFFICE

The newly appointed Registered Agent and Registered Office:

Miguel A. Rodriguez Sardinas

Address: 2742 SW 8 ST, #11

Miami, FL 33135

## **CHANGE OF ARTICLE IV NUMBER OF SHARES**

The number of shares the corporation is authorized to issue is:

100



The Amended Articles and each Amendment described herein were approved by the shareholders. The number of votes cast for the amendments was sufficient for approval. The Amendments are hereby adopted and shall be effective as of the date written below.

Signed this 31st. day of Avgvs+ . 2020.

Sionature

Miguel A. Rodriguez Sardinas, President

## ACCEPTANCE BY REGISTERED AGENT

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.

Name: Miguel A. Rodriguez Sardinas