## P170000 Z44 02

| (Re                     | equestor's Name)   |      |
|-------------------------|--------------------|------|
| (Ad                     | idress)            |      |
| (Ad                     | ldress)            |      |
| (Cit                    | ty/State/Zip/Phone | e #) |
| PICK-UP                 | ☐ WAIT             | MAIL |
| (Bu                     | siness Entity Nar  | ne)  |
| (Do                     | cument Number)     |      |
| Certified Copies        |                    |      |
| Special Instructions to | Filing Officer:    |      |
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Office Use Only



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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORAT             | ION: SANTISO HEALT                          | 'H SERVICES CORP   |   |                      |
|------------------------------|---|--|---|----------------------|
| DOCUMENT NUMBER              | D17000024402                                |  |   |                      |
| The enclosed Articles of A   | mendment and fee are su                     | bmitted for filing.  |   |                      |
| Please return all correspond | dence concerning this ma                    | tter to the following:   |   |                      |
| FRA                          | NKLIN SANTISO                               |  |   |                      |
|                              |   | Name of Contact Person   | <u></u>   |                      |
| SAN                          | NTISO HEALTH SERVI                          | CES  |   |                      |
|                              |   | Firm/ Company  |   |                      |
| 190                          | 18 NW 53RD CT                               |  |   | 13                   |
|                              |   | Address  |   |                      |
| MIA                          | MI GARDENS, FL 3305                         | 55   |   | 門意                   |
|                              |   | City/ State and Zip Code   | 2   | 7型 5                 |
| SAN                          | TISOHEALTHSERV@                             | ҮАНОО.СОМ  |   | 2021 HAY 15 BAILL 24 |
|                              | E-mail address: (to be us                   | ed for future annual report                                      | notification)   | - A.O                |
|                              |   |  |   | 三                    |
| For further information cou  | icerning this matter, pleas                 | se call:   |   | <b>V</b>             |
| FRANKLIN SANTISO             |   | 786  | 600-5004  |                      |
| Name of Co                   | ontact Person                               | Area Coc   | de & Daytime Telephone Nu   | mber                 |
| Enclosed is a check for the  | following amount made                       | payable to the Florida Depa                                      | artment of State:   |                      |
| S35 Filing Fee               | ■\$43.75 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)                                  |                      |
| Division<br>P.O. Box         | of Corporations                             | Amend<br>Division<br>The Co<br>2415 N                            | Address<br>ment Section<br>n of Corporations<br>entre of Tallahassee<br>N. Monroe Street, Suite 819<br>ssee, FL 32303 | 0                    |

## Articles of Amendment to Articles of Incorporation of

| SA   | NTISO    | HEAL     | TH | SERVICES   | CORP |
|------|----------|----------|----|------------|------|
| -271 | $\cdots$ | 11117731 |    | JULY VILLO |      |

| A. If amending name, enter the new name of the corporation:  A. If amending name, enter the new name of the corporation:  A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  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 in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  FRANKLIN SANTISO  19018 NW 53RD CT, MIAMI GARDENS FL 33055   | (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amen at Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  A. If amending name, enter the new name of the corporation.  The name must he distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," or "Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must contain the statement of the second of the principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  D. If amending the registered agent and/or registered office address:  Name of New Registered Agent  FRANKLIN SANTISO  19018 NW 53RD CT, MIAMI GARDENS FL 33055  (Florida street address)  New Registered Office Address:  (City)  New Registered Agent's Signature, if changing Registered Agent:  |  |                               |                                 |                      |                                      |           |
|--|--|--|-------------------------------|---------------------------------|----------------------|--------------------------------------|-----------|
| (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A."  8. 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 in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  FRANKLIN SANTISO  19018 NW 53RD CT, MIAMI GARDENS FL 33055   | (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amen is Articles of Incorporation:  A. If amending name, enter the new name of the corporation.  A. If amending name, enter the new name of the corporation.  The name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corline." or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the vichartered." "professional association," or the abbreviation "P.A.  B. Enter new principal office address, if applicable:  (Mailing address MUST BE A STREET ADDRESS)  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   FRANKLIN SANTISO  | (Name o  | f Corporation as currently    | filed with the Florida          | Dept. of State)      |                                      |           |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment is Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  A. If amending name, enter the new name of the corporation:  The new name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  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 in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  FRANKLIN SANTISO  19018 NW 53RD CT, MIAMI GARDENS FL 33055   | Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following aments Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  A. If amending name, enter the new name of the corporation:  The imme must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corporation or Corporation or Corporation name must contain the substitute of the sub | P17000024402   |                               |                                 |                      |                                      |           |
| The new main 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."  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 in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  FRANKLIN SANTISO  19018 NW 53RD CT, MIAMI GARDENS FL 33055  | A. If amending name, enter the new name of the corporation:  A. If amending name, enter the new name of the corporation:  A. If amending name, enter the new name of the corporation:  The name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Con". A professional corporation name must contain the standard contain the standard corporation name must contain the standard corporation name standard |  | (Document Number of           | Corporation (if known)          | n. A-                |                                      |           |
| The manuscript of the abbreviation "Corp.," "Inc.," or "Co.," or the designation "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."  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 in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  FRANKLIN SANTISO  19018 NW 53RD CT, MIAMI GARDENS FL 33055   | The mane must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Cor". Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the victorial association, or the abbreviation "P.A."  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 in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   | Pursuant to the provisions of section 607.1 its Articles of Incorporation: | 006, Florida Statutes, this F | lorida Profit Corporatio        | on adopts the follow | wing amendm                          | ent(s) to |
| The manust 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."  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 in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  FRANKLIN SANTISO  19018 NW 53RD CT, MIAMI GARDENS FL 33055   | The state of the designation and contain the word "corporation." "company." or "incorporated" or the abbreviation "Cor". A professional corporation name must contain the word "chartered." "professional association." or the abbreviation "P.A."  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 in Florida, enter the name of the new registered agent and/or the new registered office address:    Name of New Registered Agent   | A. If amending name, enter the new na                                      | me of the corporation:        | JlA.                            |                      | The ne                               | w.        |
| 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:  Name of New Registered Agent  19018 NW 53RD CT, MIAMI GARDENS FL 33055   | 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:    Name of New Registered Agent   | "Inc.," or Co.," or the designation "Co                                    | orp," "Inc," or "Co". A       |                                 |                      | ation "Corp.,                        | **        |
| 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:  Name of New Registered Agent  FRANKLIN SANTISO  19018 NW 53RD CT, MIAMI GARDENS FL 33055   | 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:    Name of New Registered Agent   |  |                               |                                 | / Pr.                |                                      |           |
| 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   FRANKLIN SANTISO   | 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  | Principal office address <u>MUST BE A ST</u>                               | REET ADDRESS )                |                                 | •                    |                                      |           |
| Name of New Registered Agent  19018 NW 53RD CT, MIAMI GARDENS FL 33055   | Name of New Registered Agent    Same of New Registered Agent   FRANKLIN SANTISO  |  |                               |                                 | )\A . = =            | 202 HAY 15 MILL                      |           |
| 19018 NW 53RD CT, MIAMI GARDENS FL 33055   | 19018 NW 53RD CT, MIAMI GARDENS FL 33055   (Florida street address)   New Registered Office Address: (City)   (Zip Code)   New Registered Agent's Signature, if changing Registered Agent:   | new registered agent and/or the new  | registered office address:    | ess in Florida, enter the       | name of the          | - 22<br>- 22<br>- 22<br>- 23<br>- 24 |           |
|  | (Florida street address)  New Registered Office Address:   |  | 10010 NIM 62DIN 63T 1414      | ALCABORNO PLAGO                 |                      |                                      |           |
|  | New Registered Office Address:, Florida  |  |                               |                                 | <u> </u>             |                                      |           |
| (Florida street address)   | (City) (Zip Code)  New Registered Agent's Signature, if changing Registered Agent:   |  | (Florida stre                 | et address)                     |                      |                                      |           |
|  | New Registered Agent's Signature, if changing Registered Agent:  | New Registered Office Address:   | <del></del>                   | /*·. )                          |                      | 72. 72. 1                            |           |
| (Ciţy) (Zīp Code)  |  |  | (1)                           | Cuy)                            | (2                   | ир Соае)                             |           |
| and the second s | Signature of New Registered Agent, if changing   |  | Signature of New Re           | gistered Agent, if change       | ing                  |                                      |           |
| Signature of New Revistored Avent if changing  | Signature of New Registered Agent, if Changing   |  | Signature of New Re           | сы <i>етей пусні, у спин</i> уі | 48<br>               |                                      |           |

## Check if applicable

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

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)

Example:

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.

| X Change                   | <u>PT</u>    | John Doe         |                         |
|----------------------------|--------------|------------------|-------------------------|
| X Remove                   | <u>V</u>     | Mike Jones       |                         |
| _X Add                     | <u>sv</u>    | Sally Smith      |                         |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u>      | <u>Addres</u> s         |
| 1) Change                  | P            | FRANKLIN SANTISO | 19018 NW 53RD CT        |
| X Add                      |              |                  | MIAMI GARDENS, FL 33055 |
| Remove                     |              |                  |                         |
| 2) Change                  | VP           | ANA M RODRIGUEZ  | 19018 NW 53RD CT        |
| X Add                      |              |                  | MIAMI GARDENS, FL 33055 |
| Remove 3) Change           | <del></del>  |                  |                         |
| Add                        |              |                  | 一一一一                    |
| Remove                     |              |                  | <u> </u>                |
| 4) Change                  |              |                  | 21 21 21 21 E           |
| Add                        |              |                  |                         |
| Remove                     |              |                  |                         |
| 5) Change                  |              |                  |                         |
| Add                        |              |                  |                         |
| Remove                     |              |                  | <del>.</del>            |
| 6) Change                  |              |                  |                         |
| Add                        |              |                  |                         |
| Remove                     |              |                  |                         |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)  |                    |                 |
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| 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: | 21                 |                 |
| (if not applicable, indicate N/A)  | •                  |                 |
| $\mathcal{W}/\mathcal{V}$ .  |                    |                 |
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| •   | 04/30/2024  |                                |
|---|---|--------------------------------|
| The date of each amendment(s) adoption  |   | if other than the              |
| date this document was signed.  04/24/2024  |   |                                |
| Effective date if applicable:   |   |                                |
|   | (no more than 90 days after amendment file date)  |                                |
| Note: If the date inserted in this block document's effective date on the Departmen | es not meet the applicable statutory filing requirements, this it of State's records.   | date will not be listed as the |
| Adoption of Amendment(s)  | CHECK ONE)  |                                |
| ■ The amendment(s) was/were adopted by action was not required.                     | the incorporators, or board of directors without shareholder a  | action and shareholder         |
| ☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient      | the shareholders. The number of votes cast for the amendme<br>for approval.   | ent(s)                         |
|   | y the shareholders through voting groups. The following stat<br>ting group entitled to vote separately on the amendment(s):                                 | ement                          |
| "The number of votes east for the a   | mendment(s) was/were sufficient for approval  |                                |
| by  |   |                                |
|   | (voting group)  |                                |
| Dated 4/30)24   |   | SECRETARY 15                   |
| (By a director, p<br>selected, by an  | president or other officer – if directors or officers have not be incorporator – if in the hands of a receiver, trustee, or other charge by that fiduciary) |                                |
| Fre   | anklin fantiso.   | 一贯主                            |
|   | (Typed or printed name of person signing)   |                                |
|   | Poesident.  |                                |
|   | (Title of person signing)   | <del></del>                    |