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COVER LETTER .

TO: Amendment Section

Division of Corpora	itions		·
NAME OF CORPORA	TION:911 Oo	(-Help Inc	·
DOCUMENT NUMBE	R: <u>P170004</u>	7932	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
_	G	Name of Contact Person	ſ
	C	711 Doc-Help	Inc
	911 Doc Help Inc Firm/ Company		
	1800 Pe	mbrook Oril Address	æ.
_	, 0	Address	
	Octano	In FL 3781	0
	0,1011	0 FC 3281 City/ State and Zip Code	e
		he morry eggsed for future annual report	mail. com
For further information of	oncerning this matter, pleas	se can:	
Creisha	Morris	at (<u>467</u>) 307-4976 de & Daytime Telephone Number
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment 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)
<u>Mailir</u>	ng Address	Street	Address
	Iment Section		ment Section
	on of Corporations		on of Corporations
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

911 Out-Hulp To	ly filed with the Florida Dept. of State)
£1.70000479	•
	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation adopts the following amendmen
. If amending name, enter the new name of the corporation:	
Ge18ha Eme11a In	westments Corp. The new
name must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	1800 Pembrook Orive
	Orlando FL 32810
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Orlando FL 32810 P.O. Box 1154
	Grotha FL 34734
 If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres 	
Name of New Registered Agent	N/A
(Florida st	reet address)
New Registered Office Address:	(City) , Florida (Zip Code)
	(City) (Zip Code)

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.

N/A
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	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		.	
Add			<u> </u>
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific)		
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	<u>-</u>		
		. 	<u> </u>
			
			<u> </u>
			
			
			
	1 (e. 7)	Derthe and Charles Indian	
an amendment provides for an excharge significant for implementing the amer	<u>ange, reclassification, (</u> admont if not containe	or cancellation of issued sna d in the amendment itself:	res,
(if not applicable, indicate N/A)	Millette in Hot Containe	a in the amendment total	
	N/A		

The date of each amendment(s) adoption:date this document was signed.	May 2,2019	, if other than the
·	(no more than 90 days after amendment file date	<u> </u>
Note: If the date inserted in this block does document's effective date on the Department o	not meet the applicable statutory filing requiremen f State's records.	ts, this date will not be listed as the
Adoption of Amendment(s) (CE	HECK ONE)	
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes east for the am approval.	endment(s)
	ne shareholders through voting groups. The following group entitled to vote separately on the amendmen	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	oting group)	
	board of directors without shareholder action and s	shareholder
The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and share	holder
Dated May 2, Signature	2019	
(By a director, pre selected, by an inc	sident or other officer – if directors or officers have corporator – if in the hands of a receiver, trustee, or by by that fiduciary)	
	Gesha Morris	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	