P17000003393

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



000305081620

10/30/1?--01012--020 +*35.00

ZOLT GOT 30 PH 1: 26
SECRETARY & SIGNER
AND ANASSED FLORIDA

Manuch 8

OCT 31 2017

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CHAD COSTEL	LO, INC	
DOCUMENT NUMBER: P17000063393		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
CHAD COSTELLO		
HRA FLORIDA, INC.	Name of Contact Persor	1
1120 SW 20TH STREET	Firm/ Company	
BOCA RATON, FL 33486	Address	
	City/ State and Zip Code	:
CHADCOSTELLO@HRAFLOR	IDA.COM	
E-mail address: (to be t	used for future annual report	notification)
For further information concerning this matter, plea	use call:	
CHAD COSTELLO	561 at (4521387
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CHAD COSTELLO, INC.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000063393	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this F_{ij} its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
HRA FLORIDA, INC.	The new
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.	". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
(Trucque office dadress MOST DL A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	701 125
(Mailing address MAY BE A POST OFFICE BOX)	
	- F
	₩ º m
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	is in Florida, enter the name of the
Name of New Registered Agent	ar • • • • • • • • • • • • • • • • • • •
Nume of New Kexistered Axeni	
(Florida stree	(address)
New Registered Office Address:	. Florida
	ity) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
	a data at copy and sangarana sy see passaran

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 D	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		***
Add				
Remove				
5) Change		_		
Add				
Remove				
—				
6) Change		_		
Add				
Remove				

If amending Attach <i>addi</i>	ng or adding additional Articles, enter change(s) here: litional sheets, if necessary). (Be specific)	
ν/		
	/ A	<u> </u>
		
		
		
lf an amen	dment provides for an exchange, reclassification, or cancellation	on of issued shares,
	s for implementing the amendment if not contained in the amendate applicable, indicate N/A)	<u>ndment itself:</u>
~/	i ·	
' 		
		··· · · · · · · · · · · · · · · · · ·
		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
	(no more than 90 days after amenament fite 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 date will not be listed as the tof State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by by the shareholders was/were sufficient (the shareholders. The number of votes east for the amendment(s) for approval.
	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):
"The number of votes east for the a	mendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and shareholder
OCTOBER 26, 201	7
Dated	ud Coi
selected, by an	oresident or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court diary by that fiduciary)
CHAD	COSTELLO
	(Typed or printed name of person signing)
PRESII	DENT
-	(Title of person signing)