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COVER LETTER

NAME OF CORPORATION: Breath of Life Medical Centerina
DOCUMENT NUMBER: 71700066883
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Yves Laurent Name of Contact Person
Breath of Life Medical Center INC.
Firm/ Company
5090 CoConut Creek PKWY
Margate Fl 33063 City/State and Zip Code

For further information concerning this matter, please call:

Yves Laurent at (305) 930-5653

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

\$35 Filing Fee

TO: Amendment Section

Division of Corporations

□\$43.75 Filing Fee & Certificate of Status

□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)

E-mail address: (to be used for future annual report notification)

□\$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

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of PLED Dreath of Life Medical Control (Name of Corporation as corrently filed with the Florida Dept. of State) Pursuant to the provisions of section 607, 1006, Florida Statutes, this corporation adopts the following amendment(s) to 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.," or the designation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or Co., or the designation "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) 5090 Co Co Mut Creek Prwy

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:

5090 CoConut Creek PKWY

(Florida street address)

New Registered Office Address: Marquie, Florida 330

New Registered Office Address: Margate, Florida 33063
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Name of New 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	PT John I	<u>)oc</u>	
X Remove	V Mike I	Jones	
X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	7	Francess 2 M. Bataille	5090 Colonat
Add			Creek PKWy
Remove			Margate F133063
2) Change	0	Yves M. Laurent	5090 Coconut Creek
Add		·	PKWY
Remove			Margafe, fl 33063
3) Change	CFO	Frant 2 Bataille Sr.	5090 COCONUTCTECK
Add			PKWY
Remove			Margate, Fl 33063
4) V Change	Sec.	Germain Gerly I	5090 Coconut Creek
Add		·	PICWY
Remove			Margate, Fl 33063
5)Change			
Add			
Remove			····
6) Change			
Add			
Remove			

f amending or adding additional Articles (Attach additional sheets, if necessary).	Be specific)	
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an amendment provides for an exchang	e, reclassification, or cancellation of is:	sued shares.
rovisions for implementing the amendm	ent if not contained in the amendment	itself:
(if not applicable, indicate N/A)		
	······································	
	an amendment provides for an exchange provisions for implementing the amendment (if not applicable, indicate NIA)	an amendment provides for an exchange, reclassification, or cancellation of is provisions for implementing the amendment if not contained in the amendment (if not applicable, indicate N/A)

The date of each amendment(s) adoption:	, if other than
date this document was signed.	
Effective date is applicable: 7/15/2019 (no magre than 90 days after amendment file	
(no mare than 90 days after amendment file	date)
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
□ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The foll must be separately provided for each voting group entitled to vote separately on the amen	owing statement dment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action a action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and s action was not required.	hareholder
Dated_7/25/19	
Signature Ta sad Batasle	
(By a director, president or other officer – if directors or officers	
selected, by an incorporator - if in the hands of a receiver, trusted appointed fiduciary by that fiduciary)	e, or other court
FRANCESSE M BATT	71/e
(Typed or printed name of person signing)	
CEO/MD	
(Title of person signing)	· ···

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