

P17000067538

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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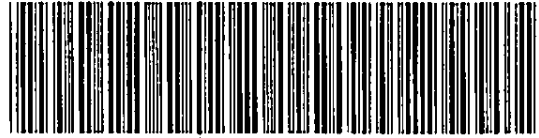
(Business Entity Name)

(Document Number)

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2017 OCT 10 AM 10:56

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CHICAGO

COVER LETTER

2017 OCT 10 AM 10:58

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: ALLIANCE Health Technology Partners, Inc.
DOCUMENT NUMBER: H17000212273 / ~~P1700006758~~
P17000067538

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joe MATTHEWS

Name of Contact Person

ALLIANCE Health Technology Partners, Inc.

Company

451 Bay Front Place, Unit 5504

Address

Naples, FL 34102

City Zip Code

jmat@completemedicalsg.com

~~jmat@completemedicalsg.com~~

Email address: (to be used for annual report notification)

jmat@alliance

For further information concerning this matter, please call:

Joe MATTHEWS

Name of Contact Person

513 325-5140

Area Code & Daytime Telephone Number

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

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certificate of Status
(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 632
Tallahassee, FL 32314

Street Address

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

Articles of Amendment

or

Articles of Incorporation

Alliance Health Technology Partners, Inc.

Same of Corporation as above is filed with the Florida Dept. of State)

P17000067538

(Document Number - Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit 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.," "Co.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A.," "P.A.S.," or "P.A.C."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS.)

451 Bay Front Place
Unit 5504
Naples, FL 34102

C. Enter new mailing address, if applicable:
(Mailing address MAY BE POST OFFICE BOX.)

P.O. Box 2168
Naples, FL 34102

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and the new registered office address:

Joe Matthews
451 Bay Front Place Unit 5504
Naples FL 34102
FL 34102

New Registered Agent's Signature I hereby accept the appointment and accept the obligations of the position.

[Signature]
Registered Agent, if changing

If amending the Officers and Directors, enter the title, name, and address 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 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 as 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:

☒ Change PT John Doe

☒ Remove V Mike Jones

☒ Add SV Sally Smith

Type of Action

(Check One)

Title

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

None

E. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary). (Be specific)

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: (if not applicable, enter N/A)		
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The date of each amendment's adoption: 10-2-17 if other than the date this document was signed.

Effective date if applicable: _____
(no more than _____ days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be submitted on each voting group entitled to vote separately on the amendment(s):

"The number of votes for the amendment(s) was we sufficient for approval
by _____
voting group."

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10-2-17

Signature: _____

If directors or officers have not been
by an incorporator - if in the hands of a receiver, trustee, or other court
fiduciary by that fiduciary

Joe MATTHEWS

(typed or printed name of person signing)

President + owner

(title of person signing)