## P18000004 524

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## COVER LETTER

TO: Amendment Section Division of Corporations

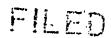
Tallahassee, FL 32314

NAME OF CORPO	RATION: HealthSpan Medic	al Systems, Inc.			
DOCUMENT NUM	BER: P18000004524				
	of Amendment and fee are so	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Timothy Hart				
		Name of Contact Person	1		
	R3 Accounting, LLC				
		Firm Company			
	2929 E. Commercial Blvd., J	'H-D			
	<u> </u>	Address	<del></del>		
	Fort Lauderdale, FL 33308				
		City State and Zip Cod	e e		
thoet	Delayonantina yam				
marr —	@r3accounting.com				
	h-mail address: (to be u	sed for future annual report	nottication)		
For further informatio	n concerning this matter, pleas				
Nama	of Contact Person	at (ar (	) de & Daytime Telephone Number		
	or the following amount made				
■ \$35 Filling 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Ameno Divisio	Address Iment Section on of Corporations (Building		

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



2019 HAR 29 P HealthSpan Medical Systems, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P18000004524 (Document Number of 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: NAname 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." N AB. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: NA(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 (Florida street oddress) New Registered Office Address: , Florida (City) 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,

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 P1D.

Changes should be noted in the following manner: Currently John Doe is listed as the PSF 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: XChange	<u>PT</u>	<u>John Do</u>	<u>v</u>	
X Remove	<u>V</u>	Mike Jos	nes	
X Add	<u>SV</u>	Salty Sn	<u>uith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_	N A	
Add				
Remove				
2) Change				
Add				
Remove				
3 ) Change				
Add				
Remove				
4) Change		<u> </u>		
Add				
Remove				
51 Change				
Add		_		-
Remove				
KCHIOVC				
6) Change				
Add				
Remove				

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, indicate N 1)		al sheets, if necessary), — (Be specific) uber of authorized shares shall increase from One (1) to One Hun	dred Million (100,000,000).
provisions for implementing the amendment if not contained in the amendment itself:			
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	orovisions for til not app	<u>implementing the amendment if not contained in the amendm</u> licable, indicate N A)	ient itself:
	,		
	<del>- n</del>		<del></del>

	March 27, 2019	
The date of each amendment(s) :	doption:	if other than the
date this document was signed.	. 27. 2010	
Ma Effective date <u>if applicable</u> :	irch 27, 2019	
	tno more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date we partment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ac by the shareholders was were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cus	t for the amendment(s) was were sufficient for approval	
by	tyoting group)	
•	tvoting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was were ac action was not required.	opted by the incorporators without shareholder action and shareholder	
March 27 Dated	. 2019	
Signature		
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court med fiduciary by that fiduciary)	_
	Timothy Hart	
	(Typed or printed name of person signing)	
	CFO	
	(Title of person signing)	