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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Supreme Health DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & S52.50 Filing Fee □\$43.75 Filing Fee & Certificate of Status \$35 Filing Fee Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallabassee, F1, 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to of Incorporation of Article

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Su oremo Health	1 Group In	<u>16</u> .
(Name of Corporation as currently	filed with the Florida Dept. of State)	
D180001210	54	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:		llowing amendment(5) to
A. If amending name, enter the new name of the corporation:		
		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	"P # "	_
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1100 Park Cens Ste 2600	Mal Blus.
	Pamparo Bch.	H-33064
C. Enter new mailing address, If applicable: (Mailing address MAY BE A POST OFFICE BOX)	400 Park Cent	tral Bluds.
	Pompano Boh.	PL33064
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office addre	dress in Florida, enter the name of the sss:	
Name of New Registered Agent		
New Registered Office Address: POPA CO	street address)  City;	33064 (Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: ir with and accept the obligations of the p	osition.
		20 
Signature of New	v Registered Agent, if changing	FIL 2018 JUL -9 SECRETARY ALLIAHASSE
Pag	e 1 of 4	ILED -9 PH 3: ARY OF STAI ASSEE, FLORI

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: XChange	PI	John Doc		
X Remove	<u>v</u>	Mike Jones	1 -	
X Add	<u>sv</u>	Sally Smith	, /8	
Type of Action (Check One)	Title	Name	MI	<u>Addres</u> s
1)Change				
Add				
Remove				
2) Change		<u> </u>		
Add				
Remove				
3) Change				- A Company of the State of the
Add				
Remove				
4) Change		<u> </u>		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

mending or adding additional At ach additional sheets, if necessary)	). (Be specific)
	λ Α
	A \ \
an amendment provides for an o	exchange, reclassification, or cancellation of issued shares, amendment if not contained in the amendment itself:
(if not applicable, indicate N/A	()
	. N.
	, / /
	<del> </del>
	/-

ne date of each amendment(s) adoption:	_, if other than the
te this document was signed.	
ffective date if applicable:  (no more than 90 days after amendment file date)	
ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will ocument's effective date on the Department of State's records.	not be listed as the
doption 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/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The tollowing statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voung 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 1-3-18	
Signature	
(By a director, presidence of their officer - if directors or officers have not been	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Blake Fishman	
(Typed or printed name of person signing)	
President	
(Title of person signing)	