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From:

Division of Corporations

Fax Number : (850)617-6380

Account Name : MEDICAL BILLING CONSULTANTS, INC.

Account Number : 120200000206

: (305)463-6690

Fax Number

: (305)463-6693

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Page: 5 of 9 2021-07-01 22:18:38 UTC 13054636693 To: 18506176380 From: Luciano Puentes

850-617-6381

8/30/2021 11:18:11 AM PAGE 1/001 Fax Server



June 30, 2021

FLORIDA DEPARTMENT OF STATE

ABC ALL BEHAVIOR THERAPIES, CORP Division of Corporations 6301 SW 94 AVENUE MIAMI, FL 33173US

SUBJECT: ABC ALL BEHAVIOR THERAPIES, CORP

REF: P18000067993

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacy Prather FAX Aud. #: H21000251806 Regulatory Specialist III Letter Number: 521A00014961

Articles of Amendment to Articles of Incorporation of

| . (Name | of Corporation as curren | tly filed with the Florida l | Dept. of State) | | | |
|---|-------------------------------|------------------------------|---|-------------------------|---------------------------------------|-------|
| P18000067993 | | • | | • | • | |
| | (Document Number | of Corporation (if known) | | | | |
| Pursuant to the provisions of section 607 its Articles of Incorporation: | .1006, Florida Statutes, this | s Florida Profit Corporatio | n adopts the fo | llowing a | mendm | ent(s |
| A. If amending name, enter the new n | ame of the corporation: | | `, | | | |
| | | | | | | |
| name must be distinguishable and contain "Inc.," or Co.," or the designation "o "chartered," "professional association, | Corp," "Inc." or "Co". | A professional corporatio | ed" or the abbi n name must | eviation : contain t | Corp., he word | d |
| B. Enter new principal office address, | | 10381 SW 68 LN | | | · · · · · · · · · · · · · · · · · · · | • |
| (Principal office address <u>MUST BE A S</u> | TREET ADDRESS) | | • | | • | |
| | | Miami, FL 33173 | | | | |
| C. Enter new mailing address, if appl (Mailing address MAY BE A POST | | 10381 SW 68 LN | | | ت:، | ٠. |
| <u> </u> | | | | | 27: | į. |
| · | | Miami, FL 33173 | | Paris. | - - - | Į. |
| D. If amending the registered agent ar | id/or registered office add | ress in Florida, enter the | name of the | iT: | ĊΊ | |
| new registered agent and/or the new | | | | | - | |
| Name of New Registered Agent | | | | | `, · | • |
| | 10381 SW 68 LN | | | - | | |
| | (Florida st | vet address) | , _ , | | | |
| New Registered Office Address: | Miami | | . Florida 33 | 173 | | |
| | | (City) | , | (Zip Code | , | |
| • | | • | | | ٠, | |
| | | • | ٠., | | | |
| New Registered Agent's Signature, if clubereby accept the appointment as registed | | | ions of the posi | tion. | | |
| | • | | | • | | |
| | | · | | | | |
| | Signature of New R | egistered Agent, if changing | | | | |
| 'haal: if annieable | | , | - | | | |
| Theck if applicable The amendment(s) is/are being filed pu | groupet to s. 607-0120-011) | (e) FS | | , | | |

. 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 PΤ John Doe X Remove <u>V</u> Mike Jones <u>\$V</u> Sally Smith \underline{X} Add Type of Action Title Address Name | (Check One) Change Λdd Remove _ Change Add Remove Change Add 🕒 Remove 4) ____ Change _ Add __ Remove Change _ Add Remove 6) ____ Change Add

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| To: 18506176380 | Page: 8 of 9 | 2021-07-01 22:18:38 UTC | 13054636693 | From: Luciano Puente: | |
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| The date of each amendment(s) date this document was signed. | adoption: | , if other than the |
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| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the l | block does not meet the applicable statutory filing requirements; this date will not be be because of State's records. | ot be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were a action was not required. | dopted by the incorporators, or board of directors without shareholder action and sh | archolder |
| ☐ The amendment(s) was/were as by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
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| by | <u>,</u> " | |
| | (voting group) | |
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| | director, president or other officer - if directors or officers have not been | |
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| | President | |
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