## P180000 84135

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: EDNA Behavioral	Health, Inc.	
	MBER: P18000084135	4	
	les of Amendment and fee are su	bmitted for filing.	
Please return all co-	rrespondence concerning this ma	tter to the following:	
	Kaylon Mallard		
	· <del></del>	Name of Contact Person	1)
	EDNA Behavioral Health, Inc	ε.	
		Firm/ Company	
	6543 Meritmoor Circle		
	<del></del>	Address	
	Orlando, Fl. 32818		
		City/ State and Zip Cod	ů
	Ednabehavioralhealth@gmail	.com	
		ed for future annual report	notification)
For further informa Kaylon Malkard	tion concerning this matter, pleas	e call: at ( 321	
Nam	e of Contact Person	at ( Area Co	) de & Daytime Telephone Number
Enclosed is a check	for the following amount made p	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P.	mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee E. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

of

EDNA Behavioral Health, Inc.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e). F.S.

12:7 -2 f''N:G0

PINO00084135  (Document Number of Corporation (if known)  Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendmen its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  NA 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". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address, if applicable: (Mailing address MUST BE A STREET ADDRESS)  C. Enter new mailing address, if applicable: (Mailing address, if applicable: (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  Kaylon Mallard  6543 Meritmoor Circle  (Florida street address)	of Corporation as surran	the filed with the Florida Dunt of State)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendmen its Articles of Incorporation:  A. If amending name, enter the new name of the corporation:  NA  The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.", A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "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)  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  Kaylon Mallard  6543 Meritmoor Circle  Orlando, FI 32818  6543 Meritmoor Circle  Orlando, FI 32818	or corporation as curren	tiv filed with the Florida Dept. of State)
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Name of New Registered Agent  6543 Meritmoor Circle	OTTICE BOX	Orlando, Fl 32818
Name of New Registered Agent  6543 Meritmoor Circle		
Name of New Registered Agent 6543 Meritmoor Circle		
	Kaylon Mallard	
(Florida street address)	6543 Meritmoor Circle	
	(Florida s	treet address)
New Registered Office Address: Orlando , Florida 32818	Orlando	, Florida 32818
(City) (Zip Code)		(City) (Zip Code)
I have be growned by a marint made a marint and a court of the familian with an I considered the attention of the court of the	ered agent. I am familiar	with and accept the obligations of the position
hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position	4 oue D	
Signature of New Registered Agent, if changing	Signature of New	Registered Agent, if changing
New Registered Agent's Signature, if c		(Document Number aloo6, Florida Statutes, this ame of the corporation:  If the word "corporation," for "Co", " "Inc," or "Co", " or the abbreviation "P.4.  If applicable: TREET ADDRESS )  Icable: OFFICE BOX)  Icable: GFICE BOX  Orlando  Corlando  Corlando

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 = ChiefExecutive 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	CEO	Sylvia Multari	4385 Prince Hall Blvd.
Add		-	Orlando, Fl. 32811
X Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			·

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Ε.	If amending or adding additional Articles, enter change(s) here:
	Attach additional sheets, if necessary). (Be specific)
NA	
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, indicate N/A)
NA	

	NA NA
The date of each amendment(s) a date this document was signed.	adoption:, if other than t
NA NA	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this I document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
■ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were si	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The following statement
, , , , , , , , , , , , , , , , , , , ,	each voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
	for the amendment(s) was/were sufficient for approval
"The number of votes east	
"The number of votes cast	for the amendment(s) was/were sufficient for approval
"The number of votes cast by NA by 3-26-20 Dated	(voting group)
"The number of votes cast by NA  3-26-20 Dated  Signature	(voting group)  (value)
"The number of votes cast by NA  Dated  Signature  (By a d selecte	(voting group)
"The number of votes cast by NA  Dated  Signature  (By a d selecte	(voting group)  (voting group)  (irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court
"The number of votes cast by NA  Dated  Signature  (By a d selecte	(voting group)  (voting group)  (voting group)  (irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)
"The number of votes cast by NA  3-26-20 Dated Signature (By a d selecte	(voting group)  (voting group)  (voting group)  (irector, 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 need fiduciary by that fiduciary)  Kaylon Mallard