P18000102916

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	<u> </u>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



800322763988

01/16/19--01011--002 **43.75

COVER LETTER

TO: Amendment Section Division of Corporations SHS EMERGENCY SERVICES INC NAME OF CORPORATION: P18000102916 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: ANN STRICKLAND SHS EMERGENCY SERVICES
Firm/Company 2371 LAKE BUFFUM RD W

Address
FORT MEADE FL 33841

City/ State and Zip Code LEWANN. STRICKLAND C GMAIL COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: LEW ANN STRICKIAND at (863), 581-1377

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: 43.75 Filing Fee & □\$43.75 Filing Fee & ☐ \$35 Filing Fee □\$52.50 Filling Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

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

is enclosed)

Articles of Amendment

to

Articles of Incorporation

SHS	EMERGENCY	SERVICES	INC	
	(Name of Corporation as cu	rrently filed with the l	Horida Dept. of Stat	<u>e</u>)
	P18 000	2102916		<u>ن</u>
	(Document Nun	nber of Corporation (if l	(nown)	
Pursuant to the provisions of its Articles of Incorporation:	section 607,1006, Florida Statute	s, this <i>Florida Profit Ce</i>	orporation adopts the	following amendment(s) to
A. If amending name, ente	r the new name of the corporation	on:		్లు ్లు Thenew
"Corp.," "Inc.," or Co.," o	ble and contain the word "corp or the designation "Corp," "Inc, ional association," or the abbrevia	" or "Co". A professi		or the abbreviation
B. Enter new principal off (Principal office address <u>Mi</u>	ice address, if applicable: UST BE A STREET ADDRESS)	- 	LAKE BUI	FEL 33841
C. Enter new mailing add (Mailing address <u>MAY I</u>	ress, if applicable: BE A POST OFFICE BOX)	·	AKE BUFFUX MEADE, F	<u> </u>
	2371 LAK	ddress:	RD W	33841 (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 = Trustec; C = Chairman or Clerk; CE() = 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: <u>X</u> Change	<u>PT John Doe</u>		-
X Remove	<u>V</u> <u>Mike Jones</u>		-
X Add	SV Sally Smith		÷
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s	.)
1) Change	V JUSTIN R	! HEIMERE	· · · · · · · · · · · · · · · · · · ·
Add			
X Remove			
2) Change Add	CFO JUSTIN		PPLE TREE CIR SO,FL 32819
Remove 3) X. Change	CED JIMMY	1 5-0 (1)	AKE BUFFUM RD W
Add			LEADE, FL 3384
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		 	
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N-1A	
	•
	دن د
	·
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 findicate N/A)	
. Ι Α	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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 following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	H.
"The number of votes cast for the amendment(s) was/were 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.	
Dated1 - 12 - 2019	
Signature Signature (By a director, president or other 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)	
JIMMY W. STRICKLAND	
(Typed or printed name of person signing)	
ĆEO	
(Title of person signing)	