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COVER LETTER,

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: SINGLE CALL H	EALTH INSURANCE AC	GENCY INC							
DOCUMENT NUM	P10000000557									
The enclosed Article	es of Amendment and fee are so	ibmitted for filing.								
Please return all cor	respondence concerning this ma	itter to the following:								
	Monica Reed									
	Name of Contact Person									
	SINGLE CALL HEALTH INSURANCE AGENCY INC									
	-	Firm/ Company								
	2900 Gateway Drive									
		Address								
	Pompano Beach, FL 33069									
		City/ State and Zip Cod	le							
	acct@singlecallhealth.com									
	-	sed for future annual report	notification)							
For further informati Monica Reed	on concerning this matter, plea	305	987-9009							
Name	e of Contact Person	Area Co	de & Daytime Telephone Number							
Enclosed is a check t	for the following amount made	payable to the Florida Dep	artment of State:							
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)							
<u>M</u> :	ailing Address	Street Address								
	nendment Section	Amendment Section								
	vision of Corporations D. Box 6327		on of Corporations							
	lahassee, FL 32314		entre of Tallahassee N. Monroe Street, Suite \$10							
1 41	1011000CC, 1 12 22219	2415 N. Monroe Street, Suite 810								

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

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

(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dep	ot. of State)	
P19000000557				
	(Document Number	of Corporation (if known)		-
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation s	dopts the following	amendment(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 "chartered," "professional association,	Corp," "Inc," or "Co".	A professional corporation i	or the abbreviation	The new "Corp.," the word
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				2020 FEB 20
				20 P
D. If amending the registered agent an new registered agent and/or the ne			me of the	PH 3: 23
Name of New Registered Agent	Monica Reed			
	2900 Gateway Drive			
	(Florida st	reet address)		
New Registered Office Address:	Pompano Beach		, Florida 33069	
		(City)	(Zip Coo	le)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar		•	
Check if applicable				

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	<u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Pres	Charles Donisi	2900 Gateway Drive
X Add			Pompano Beach, FL 33069
Remove			
2) Change	Pres	Evan Jaxtheimer	2900 Gateway Drive
X Add			Pompano Beach, FL 33069
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ing additional Art. eets, if necessary).	(Be specific)			
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<u>an amendment pr</u>	ovides for an exch	ange, reclassificat	<u>ion, or cancellatio</u>	n of issued shares,	
	ementing the amei	ndment if not cont	ained in the amen	dment itself:	
provisions for impl	e, maicaie (87A)				
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02/01/2020	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
02/01/2020 Effective date if applicable:	
(no more than 90 days after amendmer	t file date)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. To must be separately provided for each voting group entitled to vote separately on the	
"The number of votes east for the amendment(s) was/were sufficient for approv	al
by	 '
(voting group)	
O2/14/2020 Dated Signature (By a director, president or other other – if directors or officer.)	ers have not been
selected, by an incorporator - if in the hands of a receiver, to appointed fiduciary by that fiduciary)	
Brandon Bowsky	
(Typed or printed name of person signing)
President	
(Title of person signing)	