Florida Department of State

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jennperez @ frmwell. arm

JUN 17 AM 2: C

COR AMND/RESTATE/CORRECT OR O/D RESIGN MARILUMADRIGAL6786, INC.

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: MARILUMADRIGAL6786, INC. DOCUMENT NUMBER: P19000041134 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JENNIFER PEREZ Name of Contact Person FEMWELL GROUP HEALTH, INC. Firm/ Company 3225 AVIATION AVENUE, SUITE 700 Address , MIAMI, FL 33131 City/ State and Zip Code JENNPEREZ@FEMWELL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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: 535 Filing Fee □\$43.75 Filing Fee & □S43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Cony Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

MARILUMADRIGAL6786, INC.

with the Florida Dept. of State)
·
oration (if known)
u Profit Corporation adopts the following amendment(s) to
ompany," or "incorporated" or the abbreviation A professional corporation name must contain the
V/A
Florida, enter the name of the
•
ress)
Florida
(Zip Code)

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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 Fixecutive 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	PI	John Doe			
X Remove	$\underline{\mathbf{v}}$	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	Name	<u>Addres</u> s		
I) Change	Р	LEONARDO CATALANO	3225 AVIATION AVENUE		
Add			SUITE 700		
X_Remove			MIAMI, FL 33131		
2) Change	P	MARILU MADRIGAL	3225 AVIATION AVENUE		
X Add			SUITE 700		
Remove			MIAMI, FL 33131		
3) Change					
Add					
Remove					
4) Change					
Add					
Remove			-		
5) Change .					
Add					
Remove					
6) Change					
Add					
Remove					

E. If amending or ac	lding additional Articles, enter change(s) here: sheets, If necessary). (Be specific)
·	riginal Articles reflect the incorrect incorrect name of the President of the Corporation
đu	e to a scrivener's error. Leonard Catalano is not associated with this Corporation, and
the	refore should be removed entirely from the Articles of Organization. Please replace
to	reflect the correct President of the Corporation, Marilu Madrigal.
<u> </u>	
• • • • • • • • • • • • • • • • • • • •	
provisions for in	provides for an exchange, reclassification, or cancellation of issued shares, inplementing the amendment if not contained in the amendment itself: able, indicate N/A)
n/a	1
····	
.	,

The date of each amendment(s) adoption	on:	, 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 document's effective date on the Departm	does not meet the applicable statutory filing requirements, this dinent of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficie	by the shareholders. The number of votes east for the amendment of for approval.	(s)
	d by the shareholders through voting groups. The following statem voting group entitled to vote separately on the amendment(s):	ien!
"The number of votes cast for th	e amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and sharehold	ler
Signature (By a director selected, by appointed fine	by the incorporators without shareholder action and shareholder or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other conductary by that fiduciary)	
JEN	NIFER PEREZ (Typed or printed name of person signing)	
	(1) year of printed name of person signing)	
AU	THORIZED AGENT	
	(Title of person signing)	