P190000052836

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300331397233

07/15/19--01033--029 **52.50

19 AUG - S - AM II : 53

AUS 07 STY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: TOP CELEBRITY	' NURSE REGIS'	TRY, INC	
DOCUMENT NUM	D10000052416			
The enclosed Articles	of Amendment and fee are su	abmitted for filing		
Please return all corre	spondence concerning this ma	tter to the followi	ng:	
	WARREN D. REID			
		Name of Cont	act Persor	
	REIDS INCOME TAX & CO	OMPUTER SERV	VICE, LLO	~. ~
		Firm/ Cor	npany	
	5419 NORTH STATE ROA		. ,	
		Addre	288	
	TAMARAC, FL 33319-2921	l		
		City/ State and	d Zip Code	
reids	incometax@bellsouth.net			
	E-mail address: (to be us	sed for future ann	ual report	notification)
For further information	on concerning this matter, pleas	se call:		
WARREN D. REID			954	717-0651
Name	of Contact Person	at \	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made			
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Certified Co (Additional c enclosed)	ру	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 lahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TOP CELEBRITY NURSE REGISTRY, INC.

(Name of Corporation as currently filed with the Florida Dept. of State) P19000052836 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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 MUST BE A STREET ADDRESS) C. Enter new 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 registered office address: Same of New Registered Agent CARL FRASER CARL FRASER Summer of New Registered Agent CARL FRASER Summer of New Registered Agent CARL FRASER Summer of New Registered Agent CARL FRASER Summer of New Registered Agent Agent Agent Registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: CARL FRASER Summer of New Registered Agent Agent Registered Agent Registered agent and/or the new registered agent a	TOP CELEBRITY NURSE REGISTRY,		Ct. a. Salasha Chadala Dana of Cana		
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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: CARL FRASER CARL FRASER CARL FRASER 519 NORTH STATE ROAD 7 (Florida street address)		1 Corporation as currentl	v filed with the Florida Dept. of Stat	<u>e)</u>	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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 Salay S	P19000032830		eren er eren A		
A. If amending name, enter the new name of the corporation: 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 MUST BE A STREET ADDRESS.) C. Enter new 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 CARL FRASER 5419 NORTH STATE ROAD 7 (Florida street address)		(Document Number of	(if known)		
The new mame 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 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 CARL FRASER 27.0 47.0		006, Florida Statutes, this	Florida Profit Corporation adopts the	following a	mendment(s) to
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 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	A. If amending name, enter the new na	me of the corporation:			
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 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 CARL FRASER 5419 NORTH STATE ROAD 7 (Florida street address)				71	he noe
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 CARL FRASER 5419 NORTH STATE ROAD 7 (Florida street address) TAMARAC.	"Corp.," "Inc.," or Co.," or the designa-	ation "Corp," "Inc," or "	Co". A professional corporation nar	or the abbr	eviation
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 CARL FRASER CARL FRASER					
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					
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				35 G	
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	·			7 c.	<u> </u>
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				- 1	
Name of New Registered Agent CARL FRASER 5419 NORTH STATE ROAD 7 (Florida street address) TAMARAC 33319				, .	
Name of New Registered Agent 5419 NORTH STATE ROAD 7 (Florida street address) TAMARAC 33319	new registered agent and/or the nev		<u>s:</u>		= i
(Florida street address) TAMARAC 33319	Name of New Registered Agent	CARL FRASER			சர அ
TAMARAC 33319		5419 NORTH STATE RO			
TAMARAC 33319		(Florida st	reet address)	_	
New Registered Office Address:	New Registered Office Address:	TAMARAC	. Florida	33319	
(City) (Zip Code)			(City)	(Zip Cod	l e)
New Registered Agent's Signature, if changing Registered Agent:	I hereby accept the appointment as regist	ered ogeni. I am familiar	with and accept the obligations of the p	osition.	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	ζ.	The			
		Signature of New 1	Registered Agent, if changing		

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	P	CARL FRASER	5419 NORTH STATE ROAD 7
Add			TAMARAC, FL 33319
Remove			
2) Change			
Add			
Remove			-
3) Change			- 2 7
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(s) here:	
Attach additional sheets, if necessary). (Be specific)	
	
	
	<u>.</u>
	<u> </u>
····	
	, <u>}</u>
	19
	AUG
f an amendment provides for an exchange, reclassification, or cancellation of issued shares,	7
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
	\$32 -
	<u>ස</u> ැ: න
	>

	06/21/2019	
The date of each amendment(s) ad	option:	, if other than th
date this document was signed.	1,2010	
U6/2 Effective date <u>if applicable</u> :	1/2019	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date wipartment of State's records.	Il not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
"The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
; — —— —	(voting group)	
action was not required. The amendment(s) was/were add action was not required. 07/10/2 Dated Signature (By a conscient selected)	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 ted fiduciary by that fiduciary)	FILED 19 AUG -6 -AMII: 5 3
	CARL FRASER	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	