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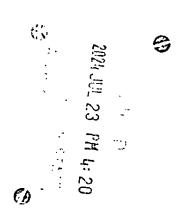
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

. . .

| NAME OF CORPOR | RATION: BOCA BEAUTY I | RX, P.A. | | |
|---|---|--|---|--|
| DOCUMENT NUME | | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corres | pondence concerning this ma | tter to the following: | | |
| | DAVID K POCES | | | |
| | | Name of Contact Person | 1 | |
| | | Firm/ Company | | |
| | PO BOX 1088 | | | |
| | BOCA RATON, FL 33429 | Address | - | |
| | | City/ State and Zip Code | | |
| | BIOREAD120@GMAIL.CO | M | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further information | n concerning this matter, pleas | se call: | | |
| DAVID K, POCES | | 561 at (| 302-6820 | |
| Name of Contact Person | | at (561) 302-6820 Area Code & Daytime Telephone Number | | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | urtment of State: | |
| S35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 | | Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BOCA BEAUTY RX, P.A.

| (Name of Corporation as curre | ently filed with the Florida Dept. of State) | | | |
|--|---|---------------|--|--|
| P20000003779 | | | | |
| (Document Number | er of Corporation (if known) | . | | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation: | his Florida Profit Corporation adopts the following amend | iment(s) to | | |
| A. If amending name, enter the new name of the corporation: | : | | | |
| FENIX WEIGHTLOSS & WELLNESS, P.A. | - - | | | |
| name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co", "chartered," "professional association," or the abbreviation "P. | . A professional corporation name must contain the w | p " | | |
| B. Enter new principal office address, if applicable: | 1388 NW BOCA RATON BLVD. | | | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | SUITE I | _ | | |
| | BOCA RATON, FL 33432 | _ | | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BON</u>) | PO BOX 1088 | 2024 | | |
| | BOCA RATON, FL. 33429 | | | |
| | | - 23 | | |
| D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr | ddress in Florida, enter the name of the cess: | - 발: | | |
| Name of New Registered Agent N/A | | 20 | | |
| | Ø) | _ | | |
| · · · · · · · · · · · · · · · · · · · | street address) | | | |
| New Registered Office Address: | Florida | | | |
| | (City) (Zip Code) | _ | | |
| | | | | |
| New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia | ent: ar with and accept the obligations of the position. | | | |
| <u> </u> | | | | |
| Signature of New | v Registered Agent, if changing | | | |
| Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1) | (1) (e), F.S. | | | |

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.

| X Change | <u>PT</u> | <u>John Doe</u> | |
|-------------------------------|--------------------------|----------------------------|-------------|
| X Remove | $\underline{\mathbf{V}}$ | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | | N/A | |
| Add | | ; | |
| Remove | | | |
| 2) Change | | - , | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | - | |
| Add | | | |
| Remove | | | |
| 51 Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
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| ach additional sheets, i | ц песехкагуя. — със я | n cijn) | | | |
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| f an amendment provide provisions for implemen (if not applicable, inc | <u>iting the amendment</u> | eclassification, or if not contained i | cancellation of iss n the amendment | ued shares, itself: | |
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| | N/A | |
|--|---|-------------------------------------|
| The date of each amendment date this document was signed | | , if other than the |
| Effective date if applicable: | 7/17/24 | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in document's effective date on t | this block does not meet the applicable statutory filing requirements, he Department of State's records. | this date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/wer action was not required. | re adopted by the incorporators, or board of directors without sharehold | ler action and shareholder |
| ☐ The amendment(s) was/wer by the shareholders was/w | re adopted by the shareholders. The number of votes east for the amenere sufficient for approval. | dment(s) |
| ☐ The amendment(s) was/wei must be separately provide | re approved by the shareholders through voting groups. The following ad for each voting group entitled to vote separately on the amendments | Statement \$); |
| | s east for the amendment(s) was/were sufficient for approval | |
| by N/A | (voting group) | |
| | (voting group) | |
| | | |
| Dated | | |
| se | y a director, president or other officer – if directors or officers have no elected, by an incorporator – if in the hands of a receiver, trustee, or oth pointed fiduciary by that fiduciary) DAVID K. POCES | er court |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |
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