Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000200792 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

٦	\neg	٠

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Fax Number : (305)328-4774

Enter the email address for this business entity to be used for future. annual report mailings. Enter only one email address please. .

Email Address:__

COR AMND/RESTATE/CORRECT OR O/D RESIGN FUTURE HEALTH MEDICAL SERVICE CORP

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

A. RAMSEY

Electronic Filing Menu

Corporate Filing Menu

Help

FILED

Articles of Amendment to Articles of Incorporation

2025 JUN -4 AM 8: 48

	of			
UTURE FEALTH MEDICAL SERVE	CE CORP		76 77 YF A 17 7722241 - 17	
(Name	of Corporation as currently fil	ed with the Flor	ida Dept. of State)	***************************************
20000026549				
	(Document Number of Co	rporation (if kno	vn)	
ursuant to the provisions of section 607 s Articles of Incorporation:	.1006, Florida Statutes, this <i>Flor</i>	ida Profit Corpo	ration adopts the following	ig amendment(
. If amending name, enter the new n	ame of the corporation:			
				The new
ime must he distinguishable and contain ho.," or Co.," or the designation "C hartered," "professional association,"	Corp," "Inc," or "Co". A pr	าสทุง, "or "incorp ofessional corpo	orated" or the abbreviation name must contain	on "Corp.," In the word
Enter new principal office address,				
Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			
	-		· · · · · · · · · · · · · · · · · · ·	···
	_			
Enter new mailing address, if appl				
(Mailing address MAY BE A POST	<u>OFFICE BOX</u>)			

	_			
If amending the registered agent an new registered agent and/or the new		in Florida, enter	the name of the	
	JAYRO LOPEZ MARTINEZ			
Name of New Registered Agent	THE SOLES HINCHASE			
				-
	15271 NW 60TH AVE SUITE	201		_
	15271 NW 60TH AVE SUITE (Florida street a	· · · · · · · · · · · · · · · · · · ·		-
New Rogistered Office Address:		· · · · · · · · · · · · · · · · · · ·	, Florida 33014	-

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

Example:

To:

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; $C = Chairman\ or\ Clerk$; $CEO = Chief\ Executive\ Officer$; $CEO = Chief\ Financial\ Officer$. 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	PT	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
1) Change	P	JAYRO LOPEZ MARTINEZ	15271 NW 60TH AVE
XX Add			SUFFE 201
Remove			MIAMI LAKES, FL 33014
2) XX Change	VP	YOEL REVERON	15271 NW 60TH AVE
Add			SUITE 201
Remove Change			MIAMI LAKES, FL 33014
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
	FVIE. (64 P 54) (14 P 54)
, ., .,	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the ame	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:
provisions for implementing the ame	ndment if not contained in the amendment itself:

The date of each a	U5/28/2025 amendment(s) adoption:
date this document	was signed.
Effective date if a	pplicable:
	pplicable: (no more than 90 days after amendment file date)
	inserted in this block does not meet the applicable statutory filling requirements, this date will not be listed as the ve date on the Department of State's records.
Adoption of Amer	adment(s) (CHECK ONE)
The amendment action was not r	(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder equired.
	i(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) ders was/were sufficient for approval.
	(s) was/were approved by the shareholders through voting groups. The following statement tely provided for each voting group entitled to vote separately on the amendment(s):
"The num	ber of votes cast for the amendment(s) was/were sufficient for approval
by	. "
7	(voting group)
1	Dated
S	ignature Voel Reveron
	(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)
	YOEL REVERON
	(Typed or printed name of person signing)
	P
	(Title of person signing)