## P200000 28760

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF COR	PORATION: Life & Health Solu	itions Corp	
	UMBER: P20000028760		
	icles of Amendment and fee are su	bmitted for filing.	
Please return ail c	orrespondence concerning this ma	tter to the following:	
	Joseph J. Tretola		
		Name of Contact Persor	1
	LIFE & HEALTH SOLUTIO	INS CORP	
	<del></del>	Firm/ Company	_
	1675 SW Sandtrap Cres	, ,	
	7 to	Address	
	Palm City, FL 34990		
		City/ State and Zip Code	2
	joseph@nationcareservices.c	om	
	E-mail address: (to be us	sed for future annual report	notification)
For further inform	nation concerning this matter, pleas	se call:	
Joseph J. Tretola		914 at (	4899073 de & Daytime Telephone Number
Na	une of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a chec	ek for the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fe	ee	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

LIFE & HEALTH SOLUTIONS CORP

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
P20000028760	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
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.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1675 SW Sandtrap Cres
(Principal office address MUST BE A STREET ADDRESS)	Palm City, FL 34990
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1675 SW Sandtrap Cres
	Palm City, FL 34990
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
	20
(Florida s	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Gode)
	: 22 ·
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature of New	Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				Planting the state of the state
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				· · · · · · · · · · · · · · · · · · ·
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
	<del></del>
an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

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09/01/2020	
The date of each amendment(s) adoption:date this document was signed.	, if other than th
09/01/2020	
Effective date if applicable:	
(no more than 90 a	lays after amendment file date)
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	ele statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or boa action was not required.	ard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The n by the shareholders was/were sufficient for approval.	umber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to voting group entitled entitled to voting group entitled	
"The number of votes cast for the amendment(s) was/were	sufficient for approval
by	<del>, .</del>
by	
Dated 9 25 202.3  Signature By a director, president or other officer	is discovers or a fficers have gut have
selected, by an incomprator—if in the h	nands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)	
Joseph J. Tretola	
(Typed or printed na	me of person signing)
President	
(Title of person signi	ing)