P20000032629

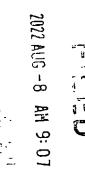
| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO: Amendment Section . Division of Corporations

| NAME OF COR | PORATION: BSA HEALTH CO | ONSULTING INC | | | |
|-------------------------------|--|---|---|------------------|--|
| | JMBER: P20000032629 | | | | |
| The enclosed Arti | cles of Amendment and fee are su | bmitted for filing. | | | |
| Please return all c | orrespondence concerning this ma | tter to the following: | | | |
| | DANIEL BEIRNE | | | | |
| | | Name of Contact Perso | ប្រ | | |
| DANIEL BEIRNE CPA | | | | | |
| | | Firm/ Company | · | | |
| | 1441 SE 3RÐ CT # 7 | | | | |
| | | Address | | | |
| DEERFIELD BEACH, FL 33441 | | | | | |
| . City/ State and Zip Code | | | | | |
| TROY@BSAHEALTHCONSULTANTS.COM | | | | | |
| \ | | sed for future annual repor | t notification) | - 755 | |
| | | | | 0 | |
| For further inform | ation concerning this matter, pleas | se call: | | · | |
| DANIEL BEIRN | Б | 954 at (| 549.3757 | · | |
| Name of Contact Person | | | ode & Daytime Telephone | Number - | |
| Enclosed is a chec | k for the following amount made | payable to the Florida Dep | partment of State: | | |
| S35 Filing Fe | e S43.75 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, FL 32314 | Amen Divisi The C 2415 | t Address dment Section for of Corporations Lentre of Tallahassee N. Monroe Street, Suite hassee, FL 32303 | 810 | |

Articles of Amendment to Articles of Incorporation of

| AZA. | HEA | 1 TH | CONSUL | TING | INC |
|------|---------|-------|--------|------|------|
| いいへ | 11144.7 | _ 111 | CONTOL | | 1170 |

| (Name of Corporation as curre | ntly filed with the Florida | Dept. of State) | |
|--|-------------------------------|------------------------|------------------|
| P20000032629 | | | |
| (Document Number | er of Corporation (if known) | | |
| Pursuant to the provisions of section 607,1006, Florida Statutes, the Articles of Incorporation: | nis Florida Profit Corporatio | on adopts the follow | ing amendment(s) |
| 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 professional corporation | | |
| 3. Enter new principal office address, if applicable: | | · | _2(|
| Principal office address <u>MUST BE A STREET ADDRESS</u>) | | • | 122 |
| · | | | -6 -1 |
| | | | |
| The transport modified address of quantities bear | | | — ∴î∄ |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | • • | 3 (M |
| | | • | <u> </u> |
| | | • | |
| | | | |
|). If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr | | name of the | |
| Name of New Registered Agent | | | |
| | | | |
| (Floride | (street address) | | |
| New Registered Office Address: | | , Florida | |
| new negatived copies, marries. | (Ciṇ) | | n Coder |
| | | | |
| | | | |
| New Registered Agent's Signature, if changing Registered Ag | | | |
| hereby accept the appointment as registered agent. I am famili | ar with and accept the obliga | itions of the position | 2. |
| | | | |
| | | | |
| Signature of No | w Registered Agent, if change | ina | |
| Signature of Net | s Kegisterea Agem, ij chang | ing | |
| 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)

Example:

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.

<u>John Doe</u> X Change <u>PT</u> X Remove Mike Jones ΔX Add <u>SV</u> Sally Smith Type of Action Address <u>Title</u> Name (Check One) PO BOX 1358 VP NAZARET ANDEKIAN I) ____ Change POMPANO BEACH ___ Add FL 33061 Remove TRES TROY MOTTER 2363 VINTAGE DR 2) ____ Change LIGHTHOUSE POINT Add FL 33064 ___ Remove __ Change __ Add : # _ Remove 4) ____ Change ___ Add 0 __ Remove 5) ____ Change ___ Add _ Remove 6) ____ Change _ Add Remove

| Attach additional sheets, if necessary). (Be specific) | | |
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| f an amendment provides for an exchange, reclassification, or cancellation of iss provisions for implementing the amendment if not contained in the amendment | sued shares, | |
| (if not applicable, indicate N/A) | nsen: | |
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| The date of each amendment(| s) adoption: | , if other than the |
|---|---|-----------------------------------|
| date this document was signed. Effective date if applicable: | AUGUST 5, 2022 | |
| | (no more than 90 days after amendment file date) | |
| | tis block does not meet the applicable statutory filing requirements, the Department of State's records. | is date will not be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| ☐ The amendment(s) was/were action was not required. | adopted by the incorporators, or board of directors without shareholde | r action and shareholder |
| ■ The amendment(s) was/were by the shareholders was/we | adopted by the shareholders. The number of votes east for the amendare sufficient for approval. | nent(s) |
| | approved by the shareholders through voting groups. The following st I for 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 BSA BOARD OF | DIRECTORS | |
| | (voting group) | |
| DatedSignature(By | ST 5, 2022 In of the first of the state of | 202 |
| | pointed fiduciary by that fiduciary) | been 2022 AUG |
| | TROY MOTTER | 8 |
| | (Typed or printed name of person signing) | · 10 |
| | TREASURER | <u>.</u> |
| | (Title of person signing) | 07 |