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## **COVER LETTER**

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

**Division of Corporations** thruse INC NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: City/ State and Zip Code For further information concerning this matter, please call: Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee **✓**\$43.75 Filing Fee & ☐ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations** 

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment

to

## Articles of Incorporation of

Clean Hands Healt	ncare INC.	<u></u>
	ly filed with the Florida Dept. of State	)
6200003		
(Document Number o	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the fo	ollowing amendment(s) to
A. If amending name, enter the new name of the corporation:	NIA	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	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	2020 111 51 121
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent		12: 20
(Florida st	reet address)	
	eer allay easy	
New Registered Office Address:	(City), Florida_	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar i	<u>:</u>	·
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)

Cromple

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</u>	<u>Doe</u>	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	SEC	Haureen Murphy	20 Suthpattane
Add Remove		'	20 Scathparthane Unit E Brankin Bourn Fr 33436
2) Change			
Add Remove Change	<u>VP</u>	David RAger	20 SOUTH DRY LANE  UNITED BEACH, FL-33436
Add		,	
Remove 4) Change		<u> </u>	
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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f an amendment provides for	an exchange, reclassif	ication, or cancellation of iss	ued shares,
provisions for implementing	the amendment if not	contained in the amendment	itself:
(if not applicable, indicate	! N/A)	414	
		1 1 1 1 1 1 1 1	

.

The date of each amendment(s) add	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment fi	te date)
<b>Note:</b> If the date inserted in this blo document's effective date on the Dep	ck does not meet the applicable statutory filing requirement of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop action was not required.	ed by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ed by the shareholders. The number of votes cast for icient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The fact voting group entitled to vote separately on the amount	
"The number of votes cast for	r the amendment(s) was/were sufficient for approval	
by 2		
<u> </u>	(voting group)	
selected,	cfor, president or other officer – if directors or officer by an incorporator – if in the hands of a receiver, trust if fiduciary by that tiduciary)  (Typed or printed name of person signing)	
_	(Title of person signing)	