PZO 0000 72555

| (Requestor's Name) | |
|-----------------------------------------|----------------|
| (Address) | |
| (Address) | 300352378 |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | 03/25/200100F(|
| Certified Copies Certificates of Status | |
| 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 CORPO | ORATION: HAV BEHAVIOR | R ANALYSIS INC | | | |
|---------------------------------------|---------------------------------------------|------------------------------------------------------------------|--------------------------------------------------------------------------------------|--|--|
| | IBER: P20000072855 | | | | |
| | es of Amendment and fee are su | sbmitted for filing. | | | |
| Please return all cor | respondence concerning this ma | itter to the following: | | | |
| | HANY VALDES DIAZ | | | | |
| | | Name of Contact Person | 1 | | |
| | HAV BEHAVIOR ANALY: | SIS INC | | | |
| | | Firm/ Company | | | |
| | 4443 NW 203RD TER | | | | |
| | | Address | | | |
| | OPA LOCKA, FL 33055 | | | | |
| | | City/ State and Zip Code | <u></u> | | |
| | HANYVD88@gmail.com | | | | |
| | = - | sed for future annual report | notification) | | |
| For further informat HANY VALDES D | ion concerning this matter, plea | 786 | 508-7668 | | |
| Name | e of Contact Person | Area Co | de & Daytime Telephone Number | | |
| Enclosed is a check | for the following amount made | payable to the Florida Depa | artment of State: | | |
| S35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | |
| | aili <u>ng Address</u> | | <u>Address</u> | | |
| | nendment Section vision of Corporations | Amendment Section | | | |
| | O. Box 6327 | Division of Corporations The Centre of Tallahassee | | | |
| | llahassee, FL 32314 | 2415 N. Monroe Street, Suite 810 | | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

to

HAV BEHAVIOR ANALYSIS INC.

| (Name of Corporation | on as currently filed with th | e Florida Dept. of State) | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|----------------------------------------------------------|------------------|
| P20000072855 | | , | |
| (Docun | nent Number of Corporation (| (if known) | |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation: | a Statutes, this <i>Florida Profit</i> | Corporation adopts the follo | owing amendment(|
| A. If amending name, enter the new name of the co | orporation: | | |
| HVA BEHAVIOR ANALYSIS INC | | | The new |
| name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre | " or "Co". A professional | "incorporated" or the abbrev corporation name must co | viation "Corp" |
| B. Enter new principal office address, if applicable | | | - <u>-</u> - |
| Principal office address <u>MUST BE A STREET ADD</u> | | | ~ |
| | | ., | |
| | | | - - |
| Enter new mailing address, if applicable: | | | |
| (Mailing address MAY BE A POST OFFICE BO. | <u></u> | | · - ; |
| | | | <u>.</u> . |
| | | | |
| | | | . <u>-</u> |
| If amending the registered agent and/or register new registered agent and/or the new registered of | red office address in Florida | , enter the name of the | |
| new registered agent and/or the new registered to | onice address: | | |
| Name of New Registered Agent | | | |
| | | | |
| | (Florida street address) | | |
| New Registered Office Address: | | , Florida | |
| | (City) | | Zip Code) |
| | | | |
| | | | |
| New Registered Agent's Signature, if changing Regination hereby accept the appointment as registered agent. | <u>istered Agent:</u> I am familiar with and accen | t the abligations of the positi | 'on |
| , , , , , , , , , , , , , , , , , , , , | · ···· ja··········· · ······ · ······ · ······ · | The wingulous of the positi | on. |
| | | | |
| | | | |
| Signa | iture of New Registered Agen | t, if changing | <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)

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.

Example:

| X Change | <u>PT</u> | John Do | <u>e</u> | |
|-------------------------------|--------------|----------|-------------|---------|
| X Remove | V | Mike Jos | 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 | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Damoua | | | | |

| (Attach additional | dding additional Art sheets, if necessary). | (Be specific) | and the second | | | |
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| If an amendment | provides for an excl | hango reclassif | ication or cane | ullation of icense | d charac | |
| provisions for in | nplementing the amo | endment if not o | contained in the | amendment its | <u>s snar es.</u> elf: | |
| (if not applic | able, indicate N/A) | | | | | |
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| , if other than the |
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| |
| fter amendment file date) |
| autory filing requirements, this date will not be listed as the |
| |
| directors without shareholder action and shareholder |
| of votes cast for the amendment(s) |
| ing groups. The following statement arately on the amendment(s): |
| ient for approval |
| <u> </u> |
| |
| |
| irectors or officers have not been of a receiver, trustee, or other court |
| |
| person signing) |
| |
| |

(Title of person signing)