P20 000079034

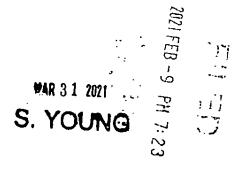
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Bright Health Advisors Inc.
DOCUMENT NUMBER: <u>P20000079034</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Zachary Walin Name of Contact Person
Bright Health Advisors Inc.
Name of Contact Person Bright Health Advisors Inc. Firm/ Company 2200 W. Commercial Blod STE. 206 Address Fort Landed-La F(33300
Address FC 33300
Fort Landerdal T FC 33309 City/ State and Zip Code
Zwalin & one connectadvisors. (om E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Zachary Walin at (561) 715-0595 Name of Contact Person Area Code & Daytime Telephone Number
Nathe of Contact Person Area Code & Daytime Telephone Number
Enclosed is a cheek for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) \$43.75 Filing Fee & \$52.50 Filing Fee & Certificate of Status (Additional copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

P.O. Box 6327

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	as currently filed with the Florida Dept. of State)
(Documen	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
One Connect A	Advisors Inc- The new
name must be distinguishable and contain the word "corp	oration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS) STE. 206
	Fort Landedole FL 33309
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2200 W Commercial Blud
	9200 W Commercial Blud 578 206. Fort Landerdale FL 33309
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	
Name of New Registered Agent	· · · · · · · · · · · · · · · · · · ·
	(Florida street address)
New Registered Office Address:	, Florida
	(city) (21)
New Registered Agent's Signature, if changing Regist	ered Agent: m familiar with and accept the obligations of the position.
r nervoy accept the appointment as registerea agent. Ta	• • • • • • • • • • • • • • • • • •
	<u>^`</u>
Signatu	re 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)

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.

\underline{X} Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) Change			
Add			
Remove			-
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			-
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

чиаси <i>аааниопаi she</i>	ing additional Arti ects, if necessary).	(Be specific)			
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f an amendment pr	<u>covides for an excl</u>	nange, reclassifica	ation, or cancellat	ion of issued share	<u>es,</u>
provisions for impl	le, indicate N/A)	nament ii not coi	ntained in the am	enament itseit:	
(5)	,				
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendmen	it file date)
Note: If the date inserted in this block does not meet the applicable statutory filing redocument's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors with action was not required.	out shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast by the shareholders was/were sufficient for approval.	for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. To must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for approxi-	val
by	**
(voting group)	
Dated $2/4/2021$	•
Signature	<i></i>
(By a director, president or other officer - it directors or off	
selected by an incorporator – if in the hands of a receiver, tappointed fiduciary by that fiduciary)	rustee, or other court
Zachary Wali	
(Typed or printed name of person signing	3)
Presid	ent.
(Title of person signing)	