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.to:

Division of Corporations

Fax Number : (850)617-6380

Account Name : MEDICAL BILLING CONSULTANTS, INC.

Account Number : I20200000206 Phone : (305)463-6690 Fax Number : (305)463-6693

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: blanquitazsfz@hotmz

COR AMND/RESTATE/CORRECT OR O/D RESIGN **BLUE SEA BEHAVIOR THERAPY CORP**

Certificate of Status	0
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Help

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

Articles of Amendment to Articles of Incorporation of

BLUE SEA BEHAVIOR THERAPY CORP		
(Name of Corporation as current)	ly filed with the Florida Dept. of State)	
P21000029945		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following an	iendinent(s) to
A. Hamending name, enter the new name of the corporation:		
	7712	e new
name must be distinguishable and contain the word "corporation," "? "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered." "professional association," or the abbreviation "P.A."	4 professional corporation name must contain the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2021
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10 - 1
		TES E
		FLAME FLAME
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:	ress in Florida, enter the name of the	
Name of New Registered Agent		
(Fiorida stre	eet address)	
New Registered Office Address:	, Florida(Citv) (Zip Code)	
'	(CRV) (ZIP Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent.—I am familiar w		
Signature of New Re	egistered Agent, if changing	
Check if applicable		

To: 18506176380 Page: 6 of 8 2021-06-05 15:36:01 UTC 13054636693 From: Luciano Puentes

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 Y. There is a change, Mike Jones leaves the corporation, Sally Smith is named the Y 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: XChange	<u>PT</u>	John Doc		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>\$V</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) X Change	P	Blanca I. Zayas Fernandez	2001 Palm Beach Lakes Blvd	
, Add			Suite 50211	
Remove			West Palm Beach, FL 33409	
2) X Change	VP	Aracelys Machado Santos	2001 Palm Beach Lakes Blvd	
Add			Suite 502H	
Remove 3) Change	Υ <u></u>	Enrique A. Ajo Pupo	West Palm Beach, FL 33409 2001 Palm Beach Lakes Blvd	
X Add			Suite 502H	
Remove			West Palm Beach, Fl. 33409	
4) Change				
Add				
Remove				
5) Change		· · · · · · · · · · · · · · · · · · ·		
Adđ				
Remove				
6) Change				
Add				
Remove				

Page: 7 of 8

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)			
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If an amendment provides for an excha	inge, reclassification, or	cancellation of issued	sbares,	• • • • •
provisions for implementing the amen (if not applicable, indicate N/A)		in the amendment tises	r.	•
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The date of each amendment(s) date this document was signed.	adoption:	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will repartment of State's records.	I not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad action was not required.	lopted by the incorporators, or board of directors without shareholder action and	l shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	15
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	2021 JUN -7
"The number of votes cast	for the amendment(s) was/were sufficient for approval	SS - 1
by		mı -
•	(voting group)	FLO
June 4, 20: Dated	21	8: 07
Signature Blanca L	ILA Zayas Fernandez Payas Fernandez (Jun 4, 2021 21 47 EDT)	_
selecte	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Blanca Zayas Fernandez	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	