## P21000041588

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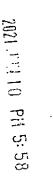
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## **COVER LETTER**

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Division of Corporations NAME OF CORPORATION: EZ Healthcare Associates Inc. DOCUMENT NUMBER: P21000041588 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Andres Rodriguez Name of Contact Person EZ Healthcare Associates Inc. Firm/ Company 10363 NW 41 Street Address Doral, FL 33178 City/ State and Zip Code info@livespaclinic.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 470-7953

Area Code & Daytime Telephone Number Andres Rodriguez Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Street Address

Amendment Section

Division of Corporations

The Centre of Tallahassee

## Articles of Amendment to Articles of Incorporation of

EZ Healthcare Associates Inc.			
( <u>Name</u>	of Corporation as currently	y filed with the Florida Dept. of State)	<del></del>
P21000041588			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the following	ig amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contain association,"	Corp," "Inc," or "Co". A	company," or "incorporated" or the abbreviati professional corporation name must conta	_The new on "Corp.," in the word
B. Enter new principal office address,	if applicable:	10363 NW 41 Street	
(Principal office address <u>MUST BE A S</u>		Doral, FL 33178	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10363 NW 41 Street	<del></del>
		Doral, FL 33178	<del></del>
D. If amending the registered agent an new registered agent and/or the new	nd/or registered office addr w registered office address:	ess in Florida, enter the name of the	<u> </u>
Name of New Registered Agent	Andres Rodriguez		
	10363 NW 41 Street		-
	(Florida stre	vet address)	_
New Registered Office Address:	Doral	Florida 33178	
	(	City) Zip (	Code)
New Registered Agent's Signature, if ci I hereby accept the appointment as regist	ered agent. I am familfar w	ith and accept the obligations of the position.  gistered Agent, if changing	2021 JUNI 10 PH 5:
Check if applicable  The amendment(s) is/are being filed process.	ursuant to \$.607.0120 (11) (a	e), F.S.	: 58

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:

 $P = President; \ F = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	PTS	Andres Rodriguez	10363 NW 41 Street
Add		-	Doral, FL 33178
Remove			
2) Change	VD	Danay Mercedes Rodriguez	10363 NW 41 Street
X Add			Doral, FL 33178
Remove 3) Change	VD	Martin Gomez	10363 NW 41 Street
XAdd			Doral, FL 33178
Remove			
4) Change	VD	Yul Marietta Lopez	10363 NW 41 Street
X Add			Doral, FL 33178
Remove			
5) Change	*		
Add			
Remove			
6) Change			
Add			
Remove			

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in amendment provi	<u>ides for an exch</u>	ange, reclassific	ation, or cancel	lation of issued s	bares,	
ovisions for implent	<u>ienting</u> the amen	<u>idment if not co</u>	entained in the a	ımendment itself	:	
(if not applicable, i	indicate N/A)		··· <del>·</del>		-	
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
5/18/21	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder ac action was not required.	tion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	n(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided 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	2021 JES 10
bv	
(voting,group)	0 10
, /	P
5/18/21	
Dated	ম ম
Signature	8
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other co	urt
appointed fiduciary by that fiduciary)	
Ándres Rodriguez	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President, Treasurer, & Secretary	
(Title of person signing)	