P21000047297

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: EMH Medical Inc			
DOCUMENT NU	MBER: P21000047297		<u>.</u>	
	les of Amendment and fee are su	abmitted for filing.		
Please return all co	rrespondence concerning this ma	atter to the following:		
	Wayne Fortin			
		Name of Contact Person	n	
	EMH Medical Inc			
		Firm/ Company		
	1861 Banks Rd, Ste B	. ,		
	Margate, FL 33063			
	-	City/ State and Zip Cod	e	
	ambonadiantilarida@amail.a			
	emhmedicalilorida@gmail.co	sed for future annual report		
For further informa	ition concerning this matter, plea		. 744-4425	
	ne of Contact Person	at (Area Co		
	for the following amount made			
■ \$35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

EMH Medical Inc (Name of Corporation as currently filed with the Florida Dept. of State) P21000047297 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Wayne Fortin Name of New Registered Agent 1861 Banks Rd, Ste B. Margate FL 33063 (Florida street address)

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(City)

(Zip Code)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PT	John A Anstett	1861 Banks Rd, Ste B
Add			Margate, FL 33063
X Remove			
2) Change	PT	Wayne Fortin	1861 Banks Rd, Ste B
X Add			Margate, FL 33063
Remove 3) Change			
Add			
Remove			
4) Change			
Add			<u> </u>
Remove			
5) Change			<u> </u>
Add			
Remove			
6) Change			<u> </u>
Add			
Remove			

	n additional sh	ing additional A eets, if necessary,). (Be specific)			
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fans	amendment p	rovides for an ex	change, reclass	sification, or c	ancellation of i	issued shares,	
provi	isions for imp	lementing the ar	nendmen <u>t if no</u>	t contained in	the amendme	nt itself:	
(if not applicat	ole, indicate N/A)					
			-				
						_	
	<u>.</u>					<u> </u>	
						···	
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The date of each o	November 19, 2021 imendment(s) adoption:, i	f other tha
date this document		i other the
Effective date if a	pplicable:	
	(no more than 90 days after amendment file date)	
	inserted in this block does not meet the applicable statutory filing requirements, this date will not we date on the Department of State's records.	be listed
Adoption of Amer	ndment(s) (<u>CHECK ONE</u>)	
The amendment action was not r	(s) was/were adopted by the incorporators, or board of directors without shareholder action and shar equired.	eholder
	t(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.	
	t(s) was/were approved by the shareholders through voting groups. The following statement tely provided for each voting group entitled to vote separately on the amendment(s):	
"The num	ber of votes cast for the amendment(s) was/were sufficient for approval	
by	<u> </u>	
	(voting group)	
	November 19, 2021	
Ι	Dated	
C	Signature Land & Tolke	
	(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 court	
	appointed fiduciary by that fiduciary)	
	WATER A. FORTIN	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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