P21000076065

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(Cit	y/State/Zip/Phone	e #)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ABA HEALING C	ENTER CORP	
DOCUMENT NUMI	BER: P21000076065		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	EDEY LADRON DE GUEV	'ARA	
		Name of Contact Person	1
	ABA HEALING CENTER C	ORP	
		Firm/ Company	
	6215 W 20TH AVE APT 414		
	0213 W 20111 AVE ALT 414		
	THAT BALL BLOOMS	Address	
	HIALEAH, FL 33012		
		City/ State and Zip Code	e
	YESAXESANDMORE@YA	ноо.сом	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	se call:	
EDEY LADRON DE	GUEVARA	786	810-3656
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	or 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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ABA HEALING CENTER CORP

(Name of Corporation as curren	ly filed with the Florida Dept. of State)		
P21000076065		. 9	
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the follo	owing amendmen	
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation,"	'company," or "incorporated" or the abbrev	The new piation "Corp.,"	
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must co	ntain the word	
B. Enter new principal office address, if applicable:	2260 EVERGLADES BLVD N		
(Principal office address MUST BE A STREET ADDRESS)	NAPLES FL 34120-5510		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2260 EVERGLADES BLVD N		
	NAPLES FL 34120-5510		
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	dress in Florida, enter the name of the		
(Florida s	treet address)		
New Registered Office Address:	, Florida		
Megister en Office municip.	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian	n <u>t:</u> with and accept the obligations of the posit	ion.	
Signature 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)

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>oc</u>	
X Remove	<u>v</u>	Mike Jo	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				<u>. </u>
Remove				
6) Change		_		
Add		-		
Remove				

	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
			
			
	· <u></u>		
	<u></u>		
f on amondment provides for an eye	phonge reclassification or cancellation of issued shares		
f an amendment provides for an exc	change, reclassification, or cancellation of issued shares,		
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, bendment if not contained in the amendment itself:		
f an amendment provides for an exc provisions for implementing the ame (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, pendment if not contained in the amendment itself:		
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, sendment if not contained in the amendment itself:		
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provisions for implementing the ame	change, reclassification, or cancellation of issued shares, lendment if not contained in the amendment itself:		
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, sendment if not contained in the amendment itself:		

	ption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	<u> </u>	
	(no more than 90 days o	fter amendment file date)
Note: If the date inserted in this blo document's effective date on the Dep	eck does not meet the applicable statement of State's records.	tutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of	directors without shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff		r of votes cast for the amendment(s)
must he separately provided for e	ach voting group entitled to vote sep	
	or the amendment(s) was/were suffice	
by	(voting group)	."
	(voting group)	
Dated Compared (By a direction)	ector, president or other officer – if	lirectors or officers have not been
selected,		of a receiver, trustee, or other court
E	DEY LADRON DE GUEVARA	
_	(Typed or printed name o	person signing)
•	RESIDENT	

(Title of person signing)