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(Do	cument Number)	
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CORPORATE

When you need ACCESS to the world

ACCESS, ____

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	CERTIFIED COPY	
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: PINNA	cle HeALTH	Flex INC
	er: P21000		
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	MARIO	Name of Contact Person	o
•	····	Name of Contact Person	n
	P. NNA Cle	Firm/ Company Address City/ State and Zip Code	lex
-	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
_	11226 NW	43 M CT	
_		Address	
	COMI SON	has FI 33	3065
	,	City/ State and Zip Cod-	•
-	E-mail address: (to be us	Aden 83 0 9 sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MARIO	Romeno	at (95 m	278-4286
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	ing Address		Address
	ndment Section sion of Corporations		ment Section n of Corporations
	Box 6327		n or Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

	ex 1/vc		
(Name of Corporation as currently	filed with the Florida Dept. of State)	ε',	1
P21000086291		7.10.	وُ
(Document Number of C	Corporation (if known)	1/6	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Statutes, the Florida	orida Profit Corporation adopts the followin		ıt(s) to
A. If amending name, enter the new name of the corporation:			
		_The new	
name must be distinguishable and contain the word "corporation," "cor "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A p "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation professional corporation name must contain	n "Corp.," n the word	
B. Enter new principal office address, if applicable:	11226 NW 4300 CT		
(Principal office address MUST BE A STREET ADDRESS)	11226 NW 432 CT CORAL SANINGS, FL 33065		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	11226 NW 4311 CT CONAL SPININGS, FI 33665	,	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the		
Name of New Registered Agent MAR; O RO	Mero	_	
New Registered Office Address: COM Spring		0 65	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.		

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, it 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: CF() = 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 Doc 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.

X Change	PI	John Doc	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P	Joshua Dalasmple	7908 NW 83Rd ST
Add	·		TAMARAC, F1 33321
X Remove	0	•	
2) Change	1	MARIO ROMPRO	11226 NW 432 CT
X Add			COM Springs F 33065
Remove 3) Change			
Add			
Remove			
4)Change	<u></u>		
Add			
Remove			
5)Change			
Add			
Remove		,	(*
6) Change			
Add			
Remove			

Muach additional sheets, if necessary).	(Be specific)	
f	the and restriction of remodels the sec	
provisions for implementing the ame	change, reclassification, or cancellation of issued shares, tendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
	 	

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	doption:, if other than the
date this document was signed.	
Effective date if applicable:	
	ino more inan 90 days after amendment file date)
Note: If the date inserted in this bidocument's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): for the amendment(s) was were sufficient for approval
THE HUMBER OF VOICE CASE	ioi the aniengment of was were sufficient for approval
	(voting group)
by	(voting group)
Dated	
Dated	rector, president or other officer – if directors or officers have not been the by an incorporator – if in the hands of a receiver, trustee, or other court