(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.  J. HORNE DEC - 2 2022
DEC

Office Use Only



200390192762

2022 DEC -1 PM 12: 31

2022 DEC. 1 AH 10: 04

RECEIVED

### CT CORP

# 3458 Lakeshore Drive, Tallahassee, FL 32312. 850-656-4724

D	ate:	12/01/2022	7.11
		Acc#I20160000072	4: 1 DW
Name:	PRO MED	DICAL HOLDINGS, INC.	
Document #:			
Order #:	14656103		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of  Apostille/Notarial Certification:		Country of Destination:	
Availability  Document Examiner Updater Verifier W.P. Verifier Ref#	Certified Plain: COGS:	d: 🗸	

Thank you!

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

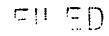
NAME OF CORPO	RATION: Pro Medical Holdin	ngs, Inc.	
	BER: P21000103966		<u></u>
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Melissa Childers		
		Name of Contact Persor	1
	Maynard, Cooper & Gale, P.G	C.	
	•	Firm/ Company	
	1901 Sixth Avenue North, Su	ite 1700	
		Address	
	Birmingham, AL 35203		
		City/ State and Zip Cod	2
	mchilders@maynardcooper.e	om	
	- ·	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
Melissa Childers		at ( <u>205</u>	488-3612
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐S43.75 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		Amend Divisio	Address Iment Section on of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Amendment**

Articles of Incorporation of



 $C_{i}$ 

2022 DEC - PH 12: 29

PRO MEDICAL HOLDINGS, INC.		erepritary (4 ° °
(Name of Corporation	on as currently filed with the F	SPORTLARY 14 CT lorida Dept. of State) AHASCH LALL
P21000103966		
(Docum	nent Number of Corporation (if k	nown)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Cor	poration adopts the following amendment(s)
A. If amending name, enter the new name of the co	rporation:	
PMI Legacy Holdings, Inc.		The new
PMI Legacy Floldings, Inc. name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp." "Inc.," "chartered," "professional association," or the abbre	' or "Co". A professional cor	orporated" or the abbreviation "Corp.," poration name must contain the word
3. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET ADD</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO.</u>	<u></u>	
D. If amending the registered agent and/or register new registered agent and/or the new registered of New Registered Agent		
	(Florida street address)	
	(1 12 111 111 111 111 111 111 111 111 11	
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing Reging hereby accept the appointment as registered agent.		e obligations of the position.
C:	ations of New Paristranial Assess 17	* demoisor
Signa	iture of New Registered Agent, if	cnanging
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)

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; 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.

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>		<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				<del></del>
Add				
Remove 3 ) Change				
Add				
Remove				
4) Change		<del>-</del>		
Add				
Remove				
5) Change				
Add				
Remove				· · · · · · · · · · · · · · · · · · ·
6) Change			<u>.</u>	
Add				
Remove				

Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)	
	·····	
		_
<del></del>	· · · · · · · · · · · · · · · · · · ·	
<del>-</del>		
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,	
provisions for implementing the ame	endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
□ The amendment(s) was/were adopted by the incorporators, or board of directors without sharehold action was not required.	der action and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment(	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
by"  (voting group)	
Dated 11/29/2022  David Livsdurty  Signature David Livsdurty	
DocuSigned by:	
Signature // (By a director, president or other officer – if directors or officers have no	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other officers.	
appointed fiduciary by that fiduciary)	ici court
Daniel Livshutz	
(Typed or printed name of person signing)	
President	

(Title of person signing)