## P22000006036

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## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>Generals</u>	Hearts Healthcare Services INC
DOCUMENT NUMBER: <u>P2200000</u>	c036
The enclosed Articles of Amendment and fee are	submitted for filing
Please return all correspondence concerning this	matter to the following:
Brenz Ju	Name of Contact Person
Generus Hear	Name of Contact Person  HEATHCARE Services INC  Firm/ Company
	Address Address
Port St Luc	1e FL, 34980 City/ State and Zip Code
E-mail address: (to be	ting ( gmod. com
For further information concerning this matter, pl	ease call:
Porenda Joseph	at ( <u>355</u> ) <u>344-nees</u> Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Department of State.
\$35 Filing Fee Sertificate of Status	<del>_</del>
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment Articles of Incorporation of

FILED

Generous Hearts Heathcom	e Services IN	_ 2022 MAR -8 PM 12: 35
Generous Hearts Heathcorn (Name of Corporation	as currently filed with the Fl	orida Dept. of State).
P22000006036		TALLAHASSEE, FL
(Docume	nt Number of Corporation (if kr	nown)
Pursuant to the provisions of section 607,1006, Florida S is Articles of Incorporation	Statutes, this <i>Florida Profit Cor</i>	noration adopts the following amendment(s)
. If amending name, enter the new name of the cor	poration:	
A Primise. Fulfilled INC name must be distinguishable and contain the word "corp linc.," or Co.," or the designation "Corp." "linc," of chartered," "professional association," or the abbrevi	or "Co". A professional corp	The new proporated 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 ADDR</u>	RESS)	
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
). If amending the registered agent and/or registered new registered agent and/or the new registered of		ter the name of the
Name of New Registered Agent		
<del></del>	(Florida street address)	
New Registered Office Address:		, Florida
	(Cuy)	(Zip Code)
New Registered Agent's Signature, if changing Regis Thereby accept the appointment as registered agent. To	tered Agent:	, in the second
Signati	ure of New Registered Agent, if	changing

Check if applicable  $\Box$  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>b.L.</u>	John Doe	2		
X Remove	<u>v</u>	Mike Jon	ies		
X Add	<u>sv</u>	Sally Sm	<u>ith</u>		
Type of Action (Check One)	Title	]	<u>Name</u>		<u>Addres</u> s
1) Change					
Add					
Remove					
2) Change				<u></u>	
Add					
Remove 3 ) Change		<del></del> .			
Add					<u> </u>
Remove					
4) Change					
Add					-
Remove					
5) Change					
Add					
Remove					4-11-2
6) Change					
Add					
Remove					

Attach additional sheets, if necessary).	ticles, enter change( (Be specific)			
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f an amendment provides for an evo	hange, reclassificat	ion, or cancellatio	on of issued share	· S.
provisions for implementing the am	endment if not cont	ained in the amer	ndment itself:	<b></b>
(if not applicable, indicate N/A)				

date this doc	each amendment(s) ad ument was signed.	option: <u>V2   22   2022</u>	, if other than th
Effective da	te <u>if applicable</u> : C	2   22   2022 (no more than 90 days after amer	idment file date)
		ock does not meet the applicable statutory fil partment of State's records.	ing requirements, this date will not be listed as the
Adoption of	Amendment(s)	( <u>CHECK ONE</u> )	
	ndment(s) was/were ado s not required.	pted by the incorporators, or board of directors	s without shareholder action and shareholder
	ndment(s) was/were ado archolders was/were su	pted by the shareholders. The number of votes fficient for approval	s east for the amendment(s)
		roved by the shareholders through voting grou each voting group entitled to vote separately o	
··Th	e number of votes cast (	for the amendment(s) was/were sufficient for a	pproval
by	One	(voting group)	·"
	Dated 02   2	2/2022	
		rector, president or other officer – if directors of by an incorporator – if in the hands of a rece ed fiduciary by that fiduciary)	or officers have not been iver, trustee, or other court
		Brenciz Jurent) (Typed or printed name of person s	
		(Typed or printed name of person s	igning)