P22000031880

(Requ	iestor's Name)	
(Addr	ess)	
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(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ness Entity Nai	me)
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Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	





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4 8/30/2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Royal Heath Inc		
DOCUMENT NUMB	ER: P22000031880		
	of Amendment and fee are sub	mitted for filing.	
Please return all corres	pondence concerning this matt	er to the following:	
	Michelle Delany		
•		Name of Contact Person	
	Royal Health Inc		
		Firm/ Company	
	1555 PALM BEACH LAKES	BOULEVARD STE 1510	
		Address	
	WEST PALM BEACH, FL 33	3401	
		City/ State and Zip Code	
	homestats2020@gmail.com		
		ed for future annual report	notification)
For further informatio	n concerning this matter, pleas		398-0622 de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
	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)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Am Div P.C	illing Address tendment Section vision of Corporations D. Box 6327 Hahassec, FL 32314	Ameno Divisio The C 2415	Address Idment Section on of Corporations Pentre of Tallahassee N. Monroe Street, Suite 810 passee, FL 32303

Articles of Amendment to Articles of Incorporation of

Royal Health Inc				3 - f
(Name of	f Corporation as current	y filed with the Florida De	pt. of State)	
P22000031880				
	(Document Number of	f Corporation (if known)		
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation	adopts the following amendment	(s) to
A. If amending name, enter the new na	me of the corporation:			
n/a			The new	
name must be distinguishable and contain "Inc" or Co" or the designation "Co"chartered." "professional association."	orp," "Inc," or "Co"	A professional corporation	" or the abbreviation "Corp.," name miss contain the word	
-		n//a		
B. Enter new principal office address, i (Principal office address MUST BE A ST	TREET ADDRESS)			
C. D	an blar			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of	OFFICE BOX)	n/a		
D. If amending the registered agent an	d/or registered office a-lo	lress in Florida, enter the r	ame of the	
new registered agent and/or the nev		<u>181</u>		
Name of New Registered Agent	n/a			
			<u></u>	
	(Florida s	treet address)		
New Registered Office Address:	n/a		. Florida	
New Registerea Office Address.		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regis	hanging Registered Age	<u>it:</u> ewith and accept the obligat	ions of the position.	
I hereny accept me appointment as regis.	ieren irgeni. Tam jamina	The time time the specific and significant	······································	
	Signature of New	Registered Agent, if changin	g	
Check if applicable				
☐ The amendment(s) is/are being filed p	oursuant 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 un 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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action	Title	Name	<u>Addres</u> s
(Check One)	VP	Robert Goldstein	4422 INVERRARY BLVD # 4812
1) Change X Add			LAUDERHILL, FL 33319
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change	 		
Add			
Remove			

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in amendment provides for an excha	ange, rectassu	contained in	the amendm	ent itself:	<u></u>	
	idillein ii not	Contained in	THE WILLIAM			
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The date of each amendment(s) adoption:	, if other than the
06/01/2022	
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, this document's effective date on the Department of State's records.	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 shareholder ac action was not required.	tion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendmen by the shareholders was/were sufficient for approval.	u(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	men!
"The number of votes cast for the amendment(s) was/were sufficient for approval	
. N/A	
by	
06/01/2022	
Dated	
Signature Mal	
(By a director, president or other officer – if directors or officers have not bee	en
selected, by an incorporator – if it the hands of a receiver, trustee, or other ec	ourt
appointed fiduciary by that fiduciary)	
John Maloney	
(Typed or printed name of person signing)	
President	
(Title of person signing)	