## P230003201

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION: Treasure Coast He	aring, Inc.	
, DOCUMENT NU	MBER: P23000032011		
	eles of Amendment and fee are su	bmitted for filing.	
Please return all co	orrespondence concerning this ma	tter to the following:	
	Elizabeth A James		
		Name of Contact Person	1
	Treasure Coast Hearing, Inc.		
		Firm/ Company	
	184 SW Pomeroy Street		
		Address	
	Stuart, FL 34997		
		City/ State and Zip Cod	е
	treasurecoasthearing@gmail.	com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	ation concerning this matter, pleas	se call:	
Brian W Hogg		at ( 561	) 277-8170
Nar	ne of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	c for the following amount made	payable to the Florida Dep	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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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

	of		F 1.	
Treasure Coast Hearing, Inc.			- FILF	- n
(Name of Corporati	ion as currently file	ed with the Florid	2000ph of State)	U
P23000032011		Ç	SEP 10 AF	110-22
(Docur	ment Number of Cor	poration (if known	TALL MAYOR	- <del>'0' 42</del>
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	a Statutes, this <i>Flori</i>	ida Profit Corpora	tion adopts the folio	STATE Overing amendment(s)
. If amending name, enter the new name of the c	orporation:			
				The new
name must be distinguishable and contain the word "c "Inc.," or Co.," or the designation "Corp," "Inc, "chartered," "professional association," or the abbro	" or "Co". A pro			
B. Enter new principal office address, if applicable				
Principal office address <u>MUST BE A STREET AD</u>	DRESS )			
	_			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO	<u>)X</u> ) _			
	_			
o. If amending the registered agent and/or registe	red office address i	in Florida, enter t	he name of the	
new registered agent and/or the new registered	office address:			
Name of New Registered Agent				
			- · · · - · · -	<del></del>
	(Florida street ad	ddress)		
New Registered Office Address:			, Florida	
	(City)	)	(	(Zip Code)
iew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.		and accept the obli	ontions of the nosit	ion
nerco, accept the appointment as registered agent.	· · · · · · · · · · · · · · · · · · ·	and decept the con-	guillona by the positi	
Sign	nature of New Regist	ered Agent, if chan	rging	<u></u>
Theck if annicable				

☐ 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>c</u>	
X Remove	<u>v</u>	Mike Joi	nes	
X Add	<u>sv</u>	Sally Sm	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		<del></del>		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
<i>5)</i> Change				
Add				
Remove				
6) Change				
Add				
Remove				

	nal sheets, if necessary). (Be specific)			
Amending: Article IV				
The number of shares the corporation is authorized to issue is: 700,000				
<del>.</del>				
	<del></del>			
	<del>-</del>			
<del></del>				
F. If an amendme	ent provides for an exchange, reclassification, or cancellation of issued shares,			
provisions for	implementing the amendment if not contained in the amendment itself: elicable, indicate N/A)			
	(65.11% ownership of issued shares / 325,559 shares owned of 500,000)			
Brian W Hogg (3	4.89% ownership of issued shares / 174,441 shares owned of 500,000)			
	<del></del>			

	09/03/2024	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements partment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopaction was not required.	nted by the incorporators, or board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the ame	ndment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	."	
	(voting group)	
09/03/2024		
Dated		
Signature	naboth a James	
	ector, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or ot	
	d fiduciary by that fiduciary)	
	Elizabeth A James	
-	(Typed or printed name of person signing)	
	President	
-	(Title of person signing)	