## P2300055677

(Re	equestor's Name)	
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: MONARCH PSYC	CHIATRY INC
DOCUMENT NUMBER: P23000055677	
The enclosed Articles of Amendment and fee are so	abmitted for filing.
Please return all correspondence concerning this ma	atter to the following:
HUMBERTO GONZALEZ	
RAPID INCOME TAX CO	Name of Contact Person  RP
	Firm/ Company
11300 NW 87 CT STE 150	
	Address
HIALEAH GARDENS, FL	33018
	City/ State and Zip Code
RAPIDINCOMETAXES@	GMAIL.COM
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	rase call:
HUMBERTO GONZALEZ	at (305 S22-6643 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
■ \$35 Filing Fee	□S43.75 Filing Fee & □S52.50 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, 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 to Articles of Incorporation of

MONARCH PSYCHIATRY INC	MON	MARCH	PSYCHI	ATRY	INC
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MONARCH PSYCHIATRY INC.	ly filed with the Florida Dept. of State)	
	THE	
P23000055677 (Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation:		
A. If amending name, enter the new name of the corporation:	The new	
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	"company," or "incorporated" or the abbreviation "Corp" A professional corporation name must contain the word	
B. Enter new principal office address, if applicable:	2523 HERSCHEL STREET	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	JACKSONVILLE, FL 32208	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2523 HERSCHEL STREET	
(Mailing address MAY BE A POST OFFICE BOS)	JACKSONVILLE, FL 32208	
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address	<u></u>	
(Florida	street address)	
New Registered Office Address:	City) (ZipiCode)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	nt: or with and accept the obligations of the position.	
Signature of Nev	v Registered Agent, if changing	
Check if applicable  ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (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 = ChiefExecutive 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 Doc, 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	
X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
(Check One)	VP,D	FERNANDEZ, GABRIELA	644 MEADOWBROOK DRIVE
1) Change Add			WINTER SPRINGS, FL 32708
x Remove			
2) Change	VP,D	LAZARUS, GABRIELA	2523 HERSCHEL STREET
x Add	<del>-</del>		JACKSONVILLE, FL 32208
Remove Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Arti Attach <i>additional sheets, if necessary)</i>	(Be specific)
	<del></del>
	•
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(у пол арупсате, такае та	
у на иррасите, такае та	
(ij not appricante, moteure 2021)	
(ў пол арұтсате, тосас эта)	
(ў погарунсаме, тосас эта)	
(у погарунсате, токас гот)	
(ц пог арупсате, тосас гот)	
(ц пог арупсате, тосас гот)	
(ц пог арупсате, токас гот)	
(ц пог арупсате, токас гот)	
(ij noi appricame, moteure suri)	
(ц пог арупсате, таксас лил)	
(ў пол арупсате, токах голг)	

•

	11/05/2024	, if other than the
The date of each amendment(s) addate this document was signed.	option:	
Effective date <u>if applicable</u> :	(no more than 90 days after amenda	neart Gla datas
<b>Note:</b> If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing partment of State's records.	g requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors w	cithout shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes c fficient for approval.	ast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups each voting group entitled to vote separately on	. The following statement the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for app	proval
by		
· · · · · · · · · · · · · · · · · · ·	(voting group)	
11/05/2024 Dated Signature		
(By a d	Mector, president or other officer – if directors or it, by an incorporator – if in the hands of a receive ted fiduciary by that fiduciary)	officers have not been er, trustee, or other court
/	RICHARD LAZARUS	
	(Typed or printed name of person sig	gning)
	PRESIDENT	
	(Title of person signing)	<del></del>