## P23000070435

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## **COVER LETTER**

FO: Amendment Section Division of Corporations	
NAME OF CORPORATION:	Tradment Center Consoration
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matte	er to the following:  ///////////////////////////////////
	Name of Contact Person
F1	oridas Treatment.
	Firm/ Company
	S.W. 35th ave
THE	FC S33/J
1	City/ State and Zip Code
BW Sepser	a) amail 1 com
E-mail address: (to be used	Hor future annual report notification)
For further information concerning this matter, please	call:
Varied Zemmerma	an at (954) 310 17/4 = 3
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made page	yable to the Florida Department of State:
\$35 Filing Fee \$\Bigcup \sum \sum \sum \sum \sum \sum \sum \sum	□\$43.75 Filing Fee & □\$52.50 Filing Fee
Certificate of Status	Certified Copy (Additional copy is enclosed)  Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Composation as currently the	l with the Florida Dept. of State)
(Document Number of Corp	oration (if known)
rsuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	la Profit Corporation adopts the following amendmen
If amending name, enter the new name of the corporation:	
man more than the state of the	The new
me must be distinguishable and contain the word "corporation," "compo nc.," or Co.," or the designation "Corp," "Inc," or "Co". A proj hartered," "professional association," or the abbreviation "P.A."	ny," or "incorporated" or the abbreviation "Corp.,"  essional corporation name must contain the word
Enter new principal office address, if applicable:	
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	
<del>-</del> -	
Tytas now mailing address if small address	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
If amending the registered agent and/or registered affine address.	
If amending the registered agent and/or registered office address in new registered agent and/or the new registered office address:	Florida, enter the name of the
W. CM D. C. L.	· -
Name of New Registered Agent	
(Florida street add	ress) —
New Registered Office Address:	, Florida
(City)	(Zip Code)

☐ 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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	SY	Sally Smith	
Type of Action (Check One)  1) Change Add Remove 2) Change Add	Title P  Add  CoS	SV_ mmf	Lavid Paul Community 3341 Sim 35 have all Sim 35 have all simple of the state of th
Remove Change Add			
Remove 4) Change Add		<del>-</del> -	**
Remove 5)ChangeAdd			- <u> </u>
Remove 6) Change Add			1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
Remove			

tach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)		
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	1.42		
			<u> </u>
		<del></del>	
•			11.
If an amendment provides for an e	xchange, reclassification, or cancellation of issued shares, mendment if not contained in the amendment itself:	•	, <del></del> ,
orovisions for implementing the a			
(y not approved)			
		· <u>-</u>	

0/1 / 2003	`
The date of each amendment(s) adoption:	if other than the
Effective date if applicable: // (no more than 90 days after amendment file date)	
(no more than 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	t 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 action and sha action was not required.	areholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
The manage of votes year for the minimum (s) was were surricem for approval	
by"	
(voting group)	
Dated $\left( \frac{1}{2} \right) \left( \frac{1}{2} \right) = \frac{1}{2}$	
Signature  (By a director, president of officer – if directors or officers have not been	
selected, by an incorporator / If in the hands of a receiver, trustee, or other court	· a
appointed fiduciary by that fiduciary)	* 3
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(Typed or printed name of person signing)	
Viesiciant 5 (EC)	. · ©
(Little of person signing)	
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