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2024 NOV -8 PM 6: 44
SECRETARY OF STATE

FILED

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CHFDX,INC.		
DOCUMENT NUM	P23000078382		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Charles R Resnick		
	CHFDX	Name of Contact Person	1
		Firm/ Company	,
	125 Lamara Way NE	,	
		Address	
	St. Petersburg, FL 33704		
		City/ State and Zip Code	:
	1717willadam@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
	n concerning this matter, pleas		247 4320
Charles Resnick		at (_)
Name	of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for	r 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)	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 Co 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

CHFDX, INC.		
(Name of Corporation as c	urrently filed with the Florida Dept.	of State)
P23000078382		
(Document Nu	umber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statut its Articles of Incorporation:	es, this Florida Profit Corporation ad	opts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:	
NA		The new
name must be distinguishable and contain the word "corporat" Inc., " or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	Co". A professional corporation na	or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	N/A	2 1
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Z4 N ECF
	·	
C. Enter new mailing address, if applicable:		m
(Mailing address MAY BE A POST OFFICE BOX)	N/A 	SEE B
		6: <u>F</u>
		F -
D 16 . P . A	-	
D. If amending the registered agent and/or registered office and registered agent and/or the new registered office and registered office and registered office.		e of the
N/A Name of New Registered Agent		
Nume of the negistered rigem		
	orida street address)	
No. B. to LOW ALL		T-1 ·)
New Registered Office Address:	(City)	Florida(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		of the position.
Signature of	New Registered Agent, if changing	
Check if applicable		

☐ 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>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Joi	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

(Attach	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
e Boar	I has approved increasing the number of authorized shares from 1,000,000 (one million) to 5,000,000 (five million
	······································
	
16	
provi	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself:
() 'A	f not applicable, indicate N/A)

	9/1/2024	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	1/2024	
Effective date <u>if applicable</u> :	(no more than 90	days after amendment file date)
Note: If the date inserted in this document's effective date on the I		able statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or be	oard of directors without shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were		number of votes cast for the amendment(s)
		ugh voting groups. The following statement one separately on the amendment(s):
"The number of votes ca	at for the amendment(s) was/were	e sufficient for approval
The Board of Direct		. .
.,,	(voting group)	
.9/5/2024 Dated Signature	11/3/2021	
(By a select		er – if directors or officers have not been hands of a receiver, trustee, or other court
	Charles R. Resnick	
	(Typed or printed n	ame of person signing)
	Chief Operating Officer	
	(Title of person sign	ning)