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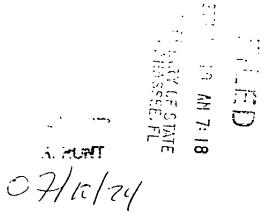
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, / COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	PL SUNSHINE M	EDICAL EQUIPMENT &	SUPPLY INC			
DOCUMENT NUM	P24000016334					
The enclosed Article.	s of Amendment and fee are su	bmitted for filing.				
Please return all corre	espondence concerning this ma	tter to the following:				
	PEDRO L SANCHEZ BENI	TEZ				
		Name of Contact Person	 1			
	PL SUNSHINE MEDICAL I	EQUIPMENT & SUPPLY	INC			
		Firm/ Company				
	1926 HOLLYWOOD BLVD	SUITE 216 B				
		Address				
	HOLLYWOOD, FL 33020					
		City/ State and Zip Code	2		n	
	sunshinemedical74@gmail.co	om		, ·	7	
	E-mail address: (to be us	ed for future annual report	notification)	— <u>; </u>	•	
				52	<u></u>	
For further information	on concerning this matter, pleas	se call:		COC COC COC	16 MM 7:	
PEDRO L SANCHE	Z BENITEZ	954 at (399-9235 de & Daytime Telephone ?	E. 고조 	7:	*,
Name	of Contact Person	Area Co	de & Daytime Telephone?	Numberi	α	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	irtment of State:			
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
An	niling Address nendment Section vision of Corporations	Amend	Address ment Section n of Corporations			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Articles of Amendment to Articles of Incorporation of

PL SUNSHINE MEDICAL EQUIPMENT & SUPPLY INC

(Name of Corporation as	currently filed with the Florida Dept. of State)
P24000016334	
(Document)	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statts Articles of Incorporation:	utes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpor	ration:
	The new
name must he distinguishable and contain the word "corpor "Inc" or Co" or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	ration," "company," or "incorporated" or the abbreviation "Corp" "Co". A professional corporation name must contain the word on "P.A."
B. Enter new principal office address, if applicable:	1926 HOLLYWOOD BLVD
Principal office address <u>MUST BE A STREET ADDRES</u>	SUITE 216 B
	HOLLYWOOD, FL 33020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SAME AS ABOVE
	75- 77
D. If amending the registered agent and/or registered o	ffice address in Florida, enter the name of the
new registered agent and/or the new registered office	e address:
Name of New Registered Agent	
(i	Florida street address)
New Registered Office Address:	Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	ed Avent:
hereby accept the appointment as registered agent. I am	familiar with and accept the obligations of the position.
Cimanus	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)

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 Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	;
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3.) Change				
Add				
Remove				Alk - ·
4) Change				000 <u>> 1</u>
Add				
Remove				<u> 8</u>
5) Change				
Add				
Remove				-
6) Change				
Add				
Remove				

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)			
LEASE ADD EIN NUMBER: 99-1610710				
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		S-	Ŋ	
. If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,	SET	A	
	ndment if not contained in the amendment itself:	Trus I	7	
(if not applicable, indicate N/A)				
		<u> </u>	8	_
				_
	4			-
				_

•	06/27/2024				
The date of each amendment(s) a	loption:			·	if other than
date this document was signed.					
06/2	7/2024				
Effective date <u>if applicable</u> :					
	(no more than 90 days after amendment	(file date)			
Note: If the date inserted in this bedocument's effective date on the De	ock does not meet the applicable statutory filing records.	quirements.	this date	will no	t be listed as
Adoption of Amendment(s)	(CHECK ONE)				
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors witho	ut sharehold	er action a	and sha	ereholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east fificient for approval.	or the amend	lment(s)		
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the a	e following : nmendment(s	statement :):		
"The number of votes cast	for the amendment(s) was/were sufficient for approva	al		<u> </u>	
by		••	2	3::	
	(voting group)	-	; r·	:	
	(romg group)		25.	45.	
			ARKY OF STANKSSEE,	\Box	•
06/27/2024			SS	2239	- .
Dated				ÁM	
Signature	to the second		STAT	7:	The state of the s
Signature	rector, president or other officer - if directors or offic	ers have not	been	8	
selected	, by an incorporator - if in the hands of a receiver, tru				
appoint	ed fiduciary by that fiduciary)				
	PEDRO L SANCHEZ BENITEZ				
	(Typed or printed name of person signing))			
	PRESIDENT				
	(Title of person signing)				