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(((H240003022063)))



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Division of Corporations

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From:

Account Name : INCFILE.COM LLC

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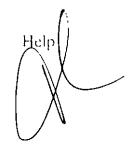
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COR AMND/RESTATE/CORRECT OR O/D RESIGN HEALTH ALLIANCE ADVISORS INC

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Page Count	06
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(((H24000302206 3)))

COVER LETTER

		COVERTEITER		
TO: Amendment Se Division of Cor				
NAME OF CORPO	DRATION: HEALTH ALLIAN	ICE ADVISORS INC		_
DOCUMENT NUM	P24000037302			-
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	itter to the following:		
	LOVETTE DOBSON			
		Name of Contact Person	n	
		Firm/ Company		
	17350 STATE HWY 249 #			2024 SEP -6 AM 9: 23 STOLLAHASSEE.FL
		Address		一 [4] 第
	HOUSTON, TX 77064			21
		City/ State and Zip Cod	e	
	EFILE1234@INCFILE.CO	М		min III
	E-mail address: (to be us	sed for future annual report	notification)	- 温 2
				· ;.; ω
For further informati	ion concerning this matter, plea	se call:		
LOVETTE DOBSC	N	at (at Co	, 8884623453	
Name	of Contact Person	Area Co	de & Daytime Telephone N	amber
Enclosed is a check (for the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	CiS43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	El\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street	Address	

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

(((H24000302206 3)))

Articles of Inco of	rporation	
HEALTH ALLIANCE	ADVISORS INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)	
P2400003	7302	
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section $607,1006$, Florida Statutes, this F its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment	ent(s) to
A. If amending name, enter the new name of the corporation:		
SENIORS HEALTH ALLIANCE INC.	The new	
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc." or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany." or "incorporated" or the abbreviation "Corp.,	••
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	202	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ALTAHASSEE	TEMO
D. If amending the registered agent and/or registered office address:	Ss in Florida, enter the name of the	
Name of New Registered Agent		
(Florida stree	A address)	
New Registered Office Address:	, Florida	
, r	iyi (Zip Codei	
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.	

Signature of New Registered Agent, if changing

Check if applicable

 \square 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: (((H24000302206 3)))

(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 Doc 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.

X Change	<u>PT</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address 282
1)Change	************		Address 2024 SEP
Add			무는 1 200
Remove			AHASSEE.
2) Change			9. 23
Add			The W
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6)Change	**********		
Add			
Remove			

tuch additional sheets, if necessary). (Be specific)	2024 SEP
	2024 SEP -
	2024 SEP
	2024 SEP -
	2024 SEP -
	2024 SEP
	2024 SEP -
	2024 SEP -
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	5.0
	S 55 - 3
	7E 23
	
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and a control of the	
an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
rovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
Cy nor apparaine, maicae (VA)	
······································	

The date of each amendment(s) adoption;	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not 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 si action was not required.	rareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) to by the shareholders was/were sufficient for approval.	7024 SEP
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):	SEP-6
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	99
(voting group)	23
09/05/2024	
Signature (By a director, president or other officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, mustee, or other court appointed liduciary by that fiduciary)	
Bradgett White	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	