P24000038987

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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: Soldiers	Choice Inc.
DOCUMENT NUMBER: P 240000389	787
The enclosed Articles of Amendment and fee are submit	ated for filing.
Please return all correspondence concerning this matter	to the following:
Joshua Back	Name of Contact Person
	Firm/ Company
5167 meadou Coconut (reck, F	Oaks Drive Address
Coconut (reek, F	City/ State and Zip Code
Jbachandd @ 9m E-mail address: (to be used t	or future annual report notification)
For further information concerning this matter, please ca	all:
Joshua Bachan	at (954) 945–1500 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made paya	able to the Florida Department of State:
Certificate of Status	S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 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

Soldiers Choice fro.	
(Name of Corporation as currently filed with the	Florida Dept, of State)
P2400038987	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit C</i> its Articles of Incorporation:	orporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
Health Advantage Inc.	The new
name must be distinguishable and contain the word "corporation," "company," or "in	corporated" or the abbreviation "Corp"
"Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional c	orporation name-must contain the word
"chartered," "professional association," or the abbreviation "P.A."	
3. Enter new principal office address, if applicable:	1
Principal office address MUST BE A STREET ADDRESS)	
	TO
	TE 6
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
[[
	
D. If amending the registered agent and/or registered office address in Florida, new registered agent and/or the new registered office address:	enter the name of the
new registered agent and/or the new registered write address.	
Name of New Registered Agent	
(Florida street address)	
N D istans J. (100) I I I amount	. Florida
New Registered Office Address: (City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent. I am familiar with and accept t	he obligations of the position.
Signature of New Registered Agent,	if changing
Check if applicable	

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 Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		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				

an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	наси аашнопа.	l sheets, if necessar	y). (Be specific	-1			
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The date of each amendment(s) add date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendme	
	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this blo document's effective date on the Dep.	ck does not meet the applicable statutory filing artment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop action was not required.	ted by the incorporators, or board of directors with	hout shareholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cas icient for approval.	t for the amendment(s)
☐ The amendment(s) was/were appromust be separately provided for ea	oved by the shareholders through voting groups. ach voting group entitled to vote separately on the	The following statement : amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for appro	oval
by	(voting group)	"
	(voting group)	
Dated 9/24	24	
(By aldire kelecipd,	ector, president or other officer – if directors or of by an incorporator – if in the hands of a receiver, d fiduciary by that fiduciary)	
- -	Joshua Bachan (Typed or printed name of person signin	ng)
_	President	<u></u>
_	(Title of person signing)	