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COVER LETTER

COOLIDGE REFERRALS, INC. NAME OF CORPORATION: _ DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

Division of Corporations

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

is enclosed)

Articles of Amendment to Articles of Incorporation

		of			
	CUDLI	DOE RES	ERRAL,	IVE-11	En
(Name of Corpor	ration as curr	ently filed with	the Florida	Dept. of State)	
PAG	100008	0751		2024 APR 1	7 AH 8-01
(Do	cument Numb	er of Corporatio	n (if known)	, -	· · · · · · · · · · · · · · · · · · ·
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, t	this <i>Florida Pro</i>	fit Corporatio	on adopts the fi	STATE ollowing amendment(s) to
A. If amending name, enter the new name of th	e corporation	<u>:</u>			
					The new
name must be distinguishable and contain the word "Inc.," or Co.," or the designation "Corp," "I. "chartered," "professional association," or the ab	nc," or "Co"	. A profession	or "incorpora ial corporatio	ted" or the abb on name must	reviation "Corp.," contain the word
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A					
				-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)		1		
D. If amending the registered agent and/or regi	istored affice :	ddress in Flor	/ (name of the	
new registered agent and/or the new register			ida, enter int	, maint of the	
Name of New Registered Agent					
	(Florid	a street address)			
New Registered Office Address:				, Florida	
New Registered Office Address.		(City)		, Pionda_	(Zip Code)
New Registered Agent's Signature, if changing					
I hereby accept the appointment as registered ager	nt. I am famil	iar with and acc	ept the obliga	itions of the po	sition.
	ignature of Ne	w Registered Ag	gent, if chang	inv	
S	- G		y g	ਾਰ	

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> <u>Jol</u>	hn Doc	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change		DAVID A. SNOW	3264 COXE BEND De. TAMPA, FL 33613
Add Remove	\supset		TAMPA, FL 33613
2) Change		JEREMY KLDIER	14902 WIND NO CREEK
_ ∠ Add			578.105C TAMPA, FL 33613
Remove Change	<u>P</u>	DEBRA DEACON COOLING	Q 14902 Windle CREEK
Add	\supset		512.105-C TAMPA, FL33613
	<u>f</u>	DAYID T. BURNHAM	14902 WINDING CREEK
Add			STE. 105-C
X Remove			<u>TAMPA, FL 33</u> 613
5) Change			
Add			
Remove			
б) Change			
Add			
Remove			

	Iditional Articles, enter chang Tnecessary). (Be specific)	21/2 137/2.
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f an amendment provide	es for an exchange, reclassifica	ation, or cancellation of issued shares,
provisions for implemen	ting the amendment if not co	ntained in the amendment itself:
(if not applicable, ind	licate N/A)	
" .		

• •

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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requirements, epartment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amend of ficient for approval.	Iment(s)
	proved by the shareholders through voting groups. The following 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	
by	<u>,"</u>	
•	(voting group)	
Dated	3-25-2024	
Signature (Lebra Deaca Corledge	
(By a d	irector, president or other officer - if directors or officers have not	
	 d, by an incorporator – if in the hands of a receiver, trustee, or oth ted fiduciary by that fiduciary) 	er court
appen.	DEBLA DEACON COOLIDGE	
	(Typed or printed name of person signing)	
	PRESIDENT POUNTL	
	(Title of person signing)	