



Date

BA20242235469



Officer Title

STATE OF CALIFORNIA Office of the Secretary of State CERTIFICATE OF AMENDMENT CA CORPORATION

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 For Office Use Only

-FILED-

File No.: BA20242235469 Date Filed: 12/28/2024

Corporation Details Corporation Name	Leahmont Worker Co	taine Barrow, LCSW, A Licensed Clinical Social orporation	
Entity No.	6493801	·	
Amendment Details			
Article Corporation Name of the	e Articles of Incorporation is amended to rea	ad:	
Corporation Name	Compassi Worker PC	ion Compass Therapy Licensed Clinical Social C	
Approval Statements			
	approved the amendment of the Articles of I uired because the corporation has no outsta		
Signatures We declare under penalty correct of our own knowled		lifornia that the matters set forth herein are true and	
Secretary	Leahmontaine Barrow	12/28/2024	
Officer Title	Officer Signature	Date	
President/Chief Executive Off.	icer Leahmontaine S Barro	w 12/23/2024	

Officer Signature