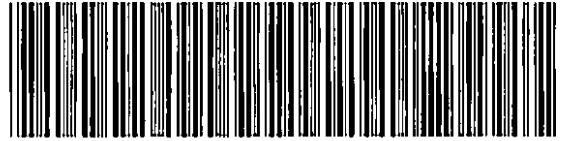


741760



600395779496

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/11/2022

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JOHN KNOX VILLAGE OF FLORIDA, INC.

DOCUMENT NUMBER: 741760

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JODY L. PUISHYS, RECORDING SECRETARY & BOARD LIASION

(Name of Contact Person)

JOHN KNOX VILLAGE OF FLORIDA, INC.

(Firm/ Company)

651 VILLAGE DRIVE

(Address)

POMPAÑO BEACH FL 33060

(City/ State and Zip Code)

JOPUISHYS@JKVFL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JODY L. PUISHYS

954

783-4021

at

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status 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

Hilaman, Michael

From: Allen-Mondesir, Natlie
Sent: Tuesday, October 11, 2022 9:56 AM
To: Hilaman, Michael
Subject: Updated Documents for Filing
Attachments: Scanned from a Xerox Multifunction Printer.pdf; JKV Division of Corp.pdf

Good morning again Mike,

Attached are the new documents for filing. Please let the agent know that the option on the John Knox Village of Florida the selection should be: The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Please let me know if you have any questions.

Natie



GUNSTER
FLORIDA'S LAW FIRM FOR BUSINESS

Natie A. Allen-Mondesir
Legal Administrative Assistant to Jonathan K. Osborne, Esq.,
Lawrence Horsburgh, Esq., and Lauren Shumate, Esq.
Las Olas Centre, 450 East Las Olas Boulevard, Suite 1400
Fort Lauderdale, FL 33301-4206
P 954-713-6417 F 954-523-1722
gunster.com



FLORIDA DEPARTMENT OF STATE
Division of Corporations

2022 OCT 11 PM 12:00

October 10, 2022

JODY L. PUISHYS
JOHN KNOX VILLAGE OF FLORIDA, INC.
651 VILLAGE DRIVE
POMPANO BEACH, FL 33060

SUBJECT: JOHN KNOX VILLAGE OF FLORIDA, INC.
Ref. Number: 741760

We have received your document for JOHN KNOX VILLAGE OF FLORIDA, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check only one box under adoption of amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6823.

Annette Ramsey
OPS

Letter Number: 122A00022609

Articles of Amendment
to
Articles of Incorporation
of

2022 OCT 11 PM 12:37

JOHN KNOX VILLAGE OF FLORIDA, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

741760

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ *The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name*

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

C. 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, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: _____

(Florida street address)

New Registered Office Address:

_____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>C</u>	<u>SIMPSON, PAUL</u>	<u>651 VILLAGE DRIVE</u> <u>POMPANO BEACH FL 33060</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>S</u>	<u>O'LEARY, WILLIAM "BILL"</u>	<u>1100 EAST LAST OLAS BLVD.</u> <u>FT. LAUDERDALE FL 33304</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>P, CEO</u>	<u>STRYKER, GERALD</u>	<u>651 VILLAGE DRIVE</u> <u>POMPANO BEACH FL 33060</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>CFO</u>	<u>CHITTENDEN, BRUCE</u>	<u>651 VILLAGE DRIVE</u> <u>POMPANO BEACH FL 33060</u>
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change <input type="checkbox"/> Add	<u>COO</u>	<u>PICKHARDT, WILLIAM "BILL"</u>	<u>651 VILLAGE DRIVE</u> <u>POMPANO BEACH FL 33060</u>
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>C</u>	<u>CRISSY, JACK</u>	<u>404 E. ATLANTIC BLVD.</u> <u>POMPANO BEACH FL 33060</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P. CEO</u>	<u>BARBERA, SALVATORE</u>	<u>651 VILLAGE DRIVE</u> <u>POMPANO BEACH FL 33060</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>CFO</u>	<u>FOLSOM, DOUGLAS</u>	<u>651 VILLAGE DRIVE</u> <u>POMPANO BEACH FL 33060</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CIO</u>	<u>WILLIAMS, CHUCK</u>	<u>651 VILLAGE DRIVE</u> <u>POMPANO BEACH FL 33060</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>CMIO</u>	<u>MCAFEE, MONICA</u>	<u>651 VILLAGE DRIVE</u> <u>POMPANO BEACH FL 33060</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u> </u>	<u> </u>	<u> </u> <u> </u>

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: SEPTEMBER 12, 2022, if other than the date this document was signed.

Effective date if applicable: SEPTEMBER 19, 2022
(no more than 90 days after amendment file date)

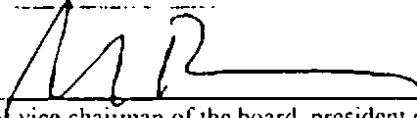
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated SEPTEMBER 19, 2022 _____

Signature  _____
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

SALVATORE A. BARBERA

(Typed or printed name of person signing)

PRESIDENT & CEO

(Title of person signing)