

NO4000007042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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05/29/12--01019--031 **35.00

Amend

FILED
12 JUN 22 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 22 2012
T. ROBERTS



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 1, 2012

ANNE CANDY
BEN'S PLACE SERVICES, INC.
4717 SAN JUAN AVE
JACKSONVILLE, FL 32210

SUBJECT: BEN'S PLACE SERVICES INC.
Ref. Number: N04000007042

We have received your document for BEN'S PLACE SERVICES INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed two different forms. You need to complete only one form to make these changes.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6050.

Tina Roberts
Regulatory Specialist II

Letter Number: 212A00015735

RECEIVED
DIVISION OF CORPORATIONS
2012 JUN 22 AM 8:09
NOT RECORDED
TO BE RECORDED
SUFFICIENCY OF FILING

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ben's Place Services, Inc.
Name of Corporation

DOCUMENT NUMBER: N04000007042

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Anne Candy
Name of Contact Person

Ben's Place Services, Inc.
Firm/Company

4717 San Juan Ave.
Address

Jacksonville, FL. 32210
City/State and Zip Code

annec@bensplacecof.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anne Candy at (904) 379-7570
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Place Services Inc.

Corporation as currently filed with the Florida Dept. of State

160400000 7042

(Document Number of Corporation (if known))

FILED
12 JUN 22 PM 3:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

N/A

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)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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:

Anne M. Candy

5566 Alpha Ave

(Florida street address)

New Registered Office Address:

Jacksonville

(City)

Florida

32205

(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.

Anne M. Candy

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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☐ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	D	Melody McFadden	371662 Henry Smith Rd Hillard, FL 32046
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	V	Joe Colosi	1326 Starratt Rd Jacksonville, FL 32218
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	ST	Terri Kirkland	2718 Sack Dr. E Jacksonville, FL 32216
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	ST	Dawn Candy	5229 Glenwood Jacksonville, FL 32205
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	Mike Kirkland	2718 Sack Dr. E Jacksonville, FL 32216
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	Lisa Coffee	11323 Derringer Cir N Jacksonville, FL 32225

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

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

Add D Rhonda Rhotton 1616 Lakeshore Blvd
Jacksonville FL 32205

Add D Ryan Woodard 4603 College St
Jacksonville FL 32205

Add D Tim Samuelson 8836 Bandera Cir S
Jacksonville FL 32244

Add D Douglas Crouse 5132 Lexington Ave
Jacksonville FL 32210

Add D Mency Flores 2533 Spring Pond Lane
Jacksonville FL 32210

The date of each amendment(s) adoption: March 15, 2012

Effective date if applicable: _____
(no more than 90 days after amendment file date)

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 June 18, 2012

Signature Anne M. Candy
(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)

Anne M. Candy
(Typed or printed name of person signing)

president
(Title of person signing)