

N13000000751

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700238772397

None Charge
Amended

01/25/13--01031--016 **70.00

FILED
2013 JAN 25 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR

1/29/13

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Alzheimer's Caregiver Resource Center, Inc.

DOCUMENT NUMBER: N1300000751

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

Please return all correspondence concerning this matter to the following:

Elayne Forgie

(Name of Contact Person)

(Firm/ Company)

6468 Kirsten Way

(Address)

Lake Worth, Florida 33467

(City/ State and Zip Code)

elayneforgie@gmail.com

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

For further information concerning this matter, please call:

Elayne Forgie

(Name of Contact Person)

at (**561**) **398-0575**

(Area Code & Daytime Telephone Number)

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

- | | | | |
|---|--|---|--|
| ☒ \$35 Filing Fee | ☐ \$43.75 Filing Fee &
Certificate of Status | ☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | ☐ \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



Alzheimer's Care Resource Center

Empowering Caregivers to Relax, Renew & Reach Out
www.AlzheimersCareResourceCenter.com

Florida Department of State
Division of Corporations
Amendment Section
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

January 25, 2013

Re: Dissolution of Alzheimer's Care Resource Center, Inc. **AND**
Name Change of Alzheimer's Caregiver Resource Center, Inc.

To Whom It May Concern,

Enclosed please find the following items:

1. Articles of Dissolution for Alzheimer's Care Resource Center, Inc. effective January 24, 2013, a Florida **for Profit** Corporation
2. Articles of Amendment to Articles of Incorporation of Alzheimer's Caregiver Resource Center, Inc., a Florida **non-profit** corporation, changing the corporate name **to** Alzheimer's Care Resource Center, Inc., a Florida non-profit corporation
3. My check for \$70.00 representing your filing fee for both documents

Please accept this letter as my notification that I/we have no intention of ever revoking the dissolution of the for profit corporations filing and request an immediate filing of the name change for our non-profit.

As the President of both corporations, we are converting to a non-profit and had to create a new corporation to do so. We wish to keep our corporate name and brand that is already known in the community and therefore we are dissolving the for profit corporation so that we can keep the name.

If for any reason these two documents cannot be filed together, please let me know. I do not want to lose my ability to keep the name Alzheimer's Care Resource Center.

Your understanding and time is greatly appreciated.

Warm regards,

Elayne Forgie
President/CEO
561-398-0575
elayneforgie@gmail.com

2328 10th Ave North #601
Lake Worth, FL 33461

Palm Beach 561-588-4545
24 Hour Caregiver Line 855-476-7600
AlzCareResourceCenter@gmail.com



Articles of Amendment
to
Articles of Incorporation
of

FILED

2013 JAN 25 AM 8:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Alzheimer's Caregiver Resource Center, Inc.

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

N1300000751

(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:

Alzheimer's Care Resource Center, Inc.

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:

(City)

_____, Florida

(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:

☒ Change	<u>PT</u>	<u>John Doe</u>
☒ Remove	<u>V</u>	<u>Mike Jones</u>
☒ 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) ☐ Change	_____	_____	_____
☐ Add			_____
☐ Remove			_____
2) ☐ Change	_____	_____	_____
☐ Add			_____
☐ Remove			_____
3) ☐ Change	_____	_____	_____
☐ Add			_____
☐ Remove			_____
4) ☐ Change	_____	_____	_____
☐ Add			_____
☐ Remove			_____
5) ☐ Change	_____	_____	_____
☐ Add			_____
☐ Remove			_____
6) ☐ Change	_____	_____	_____
☐ Add			_____
☐ Remove			_____

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

The date of each amendment(s) adoption: January 25, 2013

Effective date if applicable: January 25, 2013

(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 January 25, 2013

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)

Elayne Forgie

(Typed or printed name of person signing)

President

(Title of person signing)