

PO2000001044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

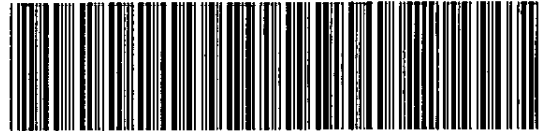
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Catherine Dabady
authorization
to make corrections
(1a)

Office Use Only

Amend
(1a 11.16.05)



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12/02/05--01015--002 **157,50

FILED
05 NOV 16 AM 10:00
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: UNIQUE ASSISTED LIVING, INC.
(Name of Corporation)

DOCUMENT NUMBER: P02000001044

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GERALD J. LINDOR
(Name of Contact Person)

LAW OFFICE OF GERALD J. LINDOR
(Firm/Company)

1851 NW 125th Ave Suite 420
(Address)

PEMBROKE PINES, FL 33
(City/State and Zip Code)

For further information concerning this matter, please call:

GERALD at (954) 443-4244
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐

\$35.00 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

FILED
05 NOV 16 AM 10:00
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

November 3, 2005

GERALD LINDOR
1851 NW 125TH AVE
SUITE 420
PEMBROKE PINES, FL 33065

SUBJECT: UNIQUE ASSISTED LIVING, INC.
Ref. Number: P02000001044

We have received your document for UNIQUE ASSISTED LIVING, 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):

Check one of the boxes in reference to the Adoption of the Amendment on the last page.

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

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) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 305A00066040

Articles of Amendment
to
Articles of Incorporation
of

UNIQUE ASSISTED LIVING, INC.

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

P02000001044

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

ARTICLE VI- The street address of its initial registered

office is 10900 W. Sample Road, Coral Springs, FL 33065

Add: Winsome Palmer AS Registered Agent

ARTICLE VII- The number of directors constituting the initial

board of directors is one (1). The name and address of the person

or persons who are to serve as director(s) until the first

annual meeting of the shareholders or until their successor(s)

is/are elected and qualified are:

Winsome Palmer 10900 W, Sample Road, Coral Springs, FL 33065.

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

FILED
05 NOV 16 AM 10:00
TALLAHASSEE, FLORIDA

November 16, 2005

Division of Corporation

ATT: IRENE

FAX: 850-245-6897

I am familiar with the responsibility of a Registered Agent and I accept responsibility of a Registered Agent.



WINSOME PALMER

The date of each amendment(s) adoption: October 10th, 2005

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

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

- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for 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 _____"
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signed this 10th day of October, 2005.

Signature x Audrey Thompson
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Audrey Thompson
(Typed or printed name of person signing)

INCORPORATOR
(Title of person signing)

FILING FEE: \$35