P09 0000 43906

| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | ORATION: COPACABANA | ADULT DAY CARE CEN | TER CORP | | | |
|-----------------------|---|--|--|--|--|--|
| DOCUMENT NUM | D00000013006 | | | | | |
| The enclosed Article | es of Amendment and fee are su | ibmitted for filing. | | | | |
| Please return all cor | respondence concerning this ma | atter to the following: | | | | |
| | SERGIO CABRERA | | | | | |
| | | Name of Contact Person | n | | | |
| | COPACABANA ADULT DAYCARE CENTER CORP | | | | | |
| | | Firm/ Company | | | | |
| | 3800 WEST 12 AVE SUITE | . 2 | | | | |
| | | Address | | | | |
| | HIALEAH FL 33012 | | | | | |
| | | City/ State and Zip Cod | e | | | |
| | COPACABANADAYCARE | ADULTIO@YAHOO CO | М | | | |
| | | sed for future annual report | | | | |
| For further informati | ion concerning this matter, plea | se call: at (⁷⁸⁶ | 433-0910 | | | |
| Name | e of Contact Person | Area Code & Daytime Telephone Number | | | | |
| Enclosed is a check | for the following amount made | payable to the Florida Depa | artment of State: | | | |
| \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | | |
| Mailing Address | | | Address | | | |
| | nendment Section | Amendment Section | | | | |
| | vision of Corporations | Division of Corporations | | | | |
| | D. Box 6327 | The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 | | | | |
| Ta | llahassee FI 32314 | | | | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

COPACABANA ADULT DAYCARE CENTER CORP

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

2021 JUL 12 AMII: 10

(Name of Corporation as currently filed with the Florida Dente of State) OF STATE P09000043906 (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: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp., "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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: SERGIO CABRERA Name of New Registered Agent (Florida street address) 3800 WEST 12 AVE SUITE 2 HIALEAH FL New Registered Office Address (Cin) 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 Check if applicable

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)

Example:

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 Doc 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.

| X Change | <u>PT</u> | John Doe | |
|-------------------------------|-----------|-----------------|--------------------------|
| X Remove | <u>V</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | Name | <u>Addres</u> s |
| 1) Change | PD | JOANNY CASTILLO | 3800 WEST 12 AVE SUITE 2 |
| Add X _ | | | HIALEAH FL 33012 |
| Remove 2) X Change | P | SERGIO CABRERA | 3800 WEST 12 AVE SUITE 2 |
| Add | | | HIALEAH FL 33012 |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| ittach <i>additie</i> | nal sheets, if i | necessary). | (Be specific | <i>:)</i> | | | | |
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| | 07/06/2021 | |
|---|---|---------------------------|
| The date of each amendment(s) | adoption: | , if other than the |
| date this document was signed. | | |
| 0. | 7/06/2021 | |
| Effective date if applicable: | | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the | s block does not meet the applicable statutory filing requirements, this date videous Department of State's records. | will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ■ The amendment(s) was/were a action was not required. | adopted by the incorporators, or board of directors without shareholder action a | and shareholder |
| ☐ The amendment(s) was/were a by the shareholders was/were | idopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. | |
| | approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s): | |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approval | |
| by | | |
| , | (voting group) | |
| 07/06/20 Dated Signature | SCACA | <u> </u> |
| selec | director, president or other officer — If directors or officers have not been ted, by an incorporator — if in the hand, of a receiver, trustee, or other court inted fiduciary by that fiduciary) | |
| | SERGIO CABRERA | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |

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