P20 000067872

(Requestor's Name)		
(Address)	300355	5842313
(Address)		
(City/State/Zip/Phone #)	12/16/20-	-01016625 **35.08
(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: MIRACLE COMM	MUNITY BEHAVIORAL (CENTER CORP	
DOCUMENT NUN	P20000067872			
The enclosed Article	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	itter to the following:		
	BRISAIDA DUARTE			
		Name of Contact Person	1	
	MIRACLE COMMUNITY BEHAVIORAL CENTER CORP			
	Firm/ Company			
	15660 SW 72 ST			
	<u> </u>	Address		
	MIAMLEL 33193			
	-	City/ State and Zip Cod	e	
	BDUARTE@MIRACLECBO	C.COM		
	~	sed for future annual report	notification)	
For further informat	ion concerning this matter, plea		315-6818	
Nam	e of Contact Person	at (786) 315-6818 Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Dep.	artment of State:	
S35 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			Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

MIRACLE COMMUNITY BEHAVIORAL CENTER CORP

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

(Name of Corporation	as currently filed with the Florida Dept. of State)
P20000067872	
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corp	poration:
	The new
name must be distinguishable and contain the word "corp "Inc.," or Co" or the designation "Corp," "Inc," e "chartered," "professional association," or the abbrevio	poration," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word iation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	(ESS)
	_
	100 TEC 16 PH 1: 21
C. Enter new mailing address, if applicable:	EC
(Mailing address MAY BE A POST OFFICE BOX))
	- 0
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered of	fice address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	tered Agent: am familiar with and accept the obligations of the position.
жессь, ассерстве пронительных гезменей изет. Те	an jumina with and accept the obligations of the position.
Signati	ure 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: 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)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	VP	ALEJANDRO MARQUEZ PAYNE	2924 WILLOW AVE
Add			LAKELAND FL 33803
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· 	
f an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	-

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	11/30/2020	
The date of each amendment(s) ado	ption:	, if other than the
late this document was signed.		
Effective date <u>if applicable:</u>		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Department.	ck does not meet the applicable statutory filing requirements, this datasetment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt action was not required.	ted by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes east for the amendment(sicient for approval.	5)
	oved by the shareholders through voting groups. The following stateme ach voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	••	
	(voting group)	
11/30/2020 Dated		
Signature	S Abo Human	
(By a dire	ector, president or other officer – if directors or officers have not been	
	by an incorporator - ichn the hands of a receiver, trustee, or other court	i
appointed	fiduciary by that fiduciary)	
В	RISAIDA DUARTE	
_	(Typed or printed name of person signing)	
Р	RESIDENT	
_	(Title of person signing)	

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