## 703471

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

LOVELAND VILLAGE, INC.  NAME OF CORPORATION:
703471
DOCUMENT NUMBER:
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NAN BRILEY
(Name of Contact Person)
KLINGBEIL & ROBERTS, P.A.
(Firm/ Company)
341 W. VENICE AVENUE
(Address)
VENICE, FL 34285
(City/ State and Zip Code)
NAN@K-RLAW.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
NAN BRILEY 941 485-2900 at
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee  \$\Bigcup \\$43.75 Filing Fee & \Bigcup \\$43.75 Filing Fee & \Bigcup \\$52.50 Filing Fee \\ Certificate of Status \\ (Additional copy is enclosed) \\ (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

## Articles of Amendment **Articles of Incorporation** of

FILED

2017 OCT 16 PM 1: 07 LOVELAND VILLAGE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) ALL AHASSEF (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: THE LOVELAND CENTER, INC. 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: 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: X Change X Remove X Add	<u>Y</u> <u>Y</u>	ohn Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Į	Addre <u>s</u> s
Change				
2) Change Add Remove 3 ) Change				
Add Remove 4) Change			-	
Add Remove	<del>*************************************</del>		-	
5) Change Add Remove			·	
6) Change Add Remove	<del></del>			

E. If amending or adding additional Articles, enter change(s) here:  (attach'additional sheets, if necessary). (Be specific)						
(attach additional sheets, if necessary).	(Be specific)					
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date this document was signed.	or man me
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	as the
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 10/9/17	
Signature Alle Hereror	
(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)	
Patrick J. Guerin III	
(Typed or printed name of person signing)	
CEO/Aesident (Title of person signing)	
(Title of person signing)	