708828

(Ke	questor's Name)	
(Ad	dress)	_
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(Cit	ty/State/Zip/Phone	e #)
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PICK-UP	☐ WAIT	MAIL
_	_	_
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
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TO: Amendment Section **Division of Corporations**

P.O. Box 6327

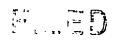
Tallahassee, FL 32314

NAME OF CORPORATION	ON:	TH FLORIDA INC			
DOCUMENT NUMBER:	708828				
The enclosed Articles of An	nendment and fee are sub-	mitted for filing.			
Please return all correspond	ence concerning this matt	er to the following:			
Gabriel Parra					
···		(Name of Contact Per	rson)	- -	
The Arc of South Florida, I	nc				
	***	(Firm/ Company))		
15280 NW 79 COURT, SU	TTE 251				
		(Address)		1-19-2-18-	
MIAMI LAKES, FLORIDA	A 33016				
		(City/ State and Zip C	Code)		
ghparra@arcsofla.org					
F	-mail address: (to be used	for future annual repo	ort notification	1)	
For further information con-	cerning this matter, please	call:			
Gabriel Parra		at	305	759-8500	
	(Name of Contact Person			(Daytime Telephone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florida D	epartment of	State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	icate of Status ied Copy tional Copy is	
	ent Section of Corporations	Am Div	eet Address endment Secti ision of Corpo Centre of T	prations	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of



THE ARC OF SOUTH FLORIDA INC

(Name of Corporation as currently filed with the F	lorida Dept. of State)	2022 HAY -4	AH 10: 29
708828			JaATa
(Documen	t Number of Corporation (if known)	Call.	CEE. FL
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	a Statutes, this <i>Florida Not For Profit Co</i>	<i>rporation</i> adopts the	following
A. If amending name, enter the new name of the co	orporation:		
N/A			The new
name must be distinguishable and contain the word "c "Company" or "Co." may not be used in the name.	corporation" or "incorporated" or the ab	breviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable	N/A :		
(Principal office address <u>MUST BE A STREET ADL</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	N/A N/A		_
D. If amending the registered agent and/or register	red office address in Florida, enter the	name of the	
new registered agent and/or the new registered	mil i i		
Name of New Registered Agent: N	/A 	****	
New Registered Office Address:	(Florida street a	ldress)	
		P1 : 1	
	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		ions 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	PT V SV	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	D	HELEN SALAZAR REALINI	15280 NW 79 COURT, SUITE 251 MIAMI LAKES, FL 33016
^ Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
δ) Change Add			
Remove			
E. If amending or additional sheet	ng addition ets, if nece	nal Articles, enter change(s) here: ssary). (Be specific)	
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The date of each amendment(s) adoption: date this document was signed.				, if other than th
Offsetive data if anniisahla.				
Effective date <u>if applicable</u> :	more than 90 day	s after amendment	file date)	
(MC	, more man you ally	s agree territoriumstrii	,	
Note: If the date inserted in this block does r	not meet the applica	ible statutory filing	g requirements, this da	ate will not be listed as the
document's effective date on the Department	of State's records.	•	- ·	

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.

nembers or members entitled to vote on the amendment(s). The amendment(s) was/were board of directors.
04/07/2022
(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)
(Typed or printed name of person signing)
EXECUTIVE DIRECTOR

(Title of person signing)