

740348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

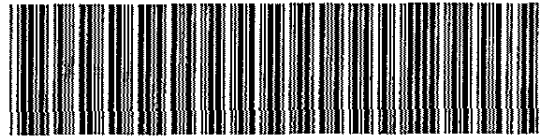
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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Volunteer Services League, Seven Rivers  
Regional Medical Center

DOCUMENT NUMBER: #740348

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth Stacklin

(Name of Contact Person)

Volunteer Services League, Seven Rivers  
(Firm/ Company)  
Regional Medical Center

6201 N. Suncoast Blvd  
(Address)

Crystal River, FL 34428  
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Elizabeth Stacklin

(Name of Contact Person)

at ( 352 ) 795-8356

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 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  
409 E. Gaines Street  
Tallahassee, FL 32399

VOLUNTEER SERVICES LEAGUE Seven Rivers Community Hospital  
(Name of corporation as currently filed with the Florida Dept. of State)

(Document number of corporation (if known))

**NEW CORPORATE NAME (if changing):**

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

(continued)

The date of adoption of the amendment(s) was: November 1, 2003

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

Adoption of Amendment(s) (CHECK ONE)

- ☐ The amendment(s) was (were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- ☒ There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signed this 21 day of April, 2005.

Signature

Elizabeth Stacklin

(By the chairman or vice chairman of the board, president or other officer- if directors have not been selected, by an incorporator- if the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Elizabeth Stacklin

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35