75935/

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COVER LETTER

TO: Amendment Section Division of Corporations

Guardianship Program of Dade County, Inc. NAME OF CORPORATION:						
759351						
DOCUMENT NUMBER:						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Carlos McDonald						
(Name of Contact Person)						
Guardianship Program of Dade County, Inc.						
(Firm/ Company)						
8300 NW 53rd Street, Suite 402						
(Address)						
Miami, FL 33166						
(City/ State and Zip Code)						
Carlosm@gpdc.org						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Jennifer Del Rio 305 482-3105						
(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 □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)						

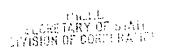
Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



2016 OCT -4 PM 2: 19

Guardianship Program of Dade County, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 759351 (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: N/A 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. N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: N/A (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: N/A Name of New Registered Agent: (Florida street address) New Registered Office Address: N/A 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.

X Change X Remove X Add	<u>V</u> <u>Mi</u>	nn Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Rosa T. Romero	2721 SW 117th Avenue
Add			Davie, Florida 33330
X Remove			
2) X Change	P	David Mangiero	12790 S. Dixie Highway
Add			Miami, Florida 33156
Remove			
3) Change	<u>s</u>	Charles A. Vilar	1200 Brickell Avenue, 10th Floor
Add			Miami, Florida 33131
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			·
Add			
Remove			

T.I.A.		
I/A	 	
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The	date of each amendment(s) adopt	9/23/2016	, if other than the
	this document was signed.		LEGISTARY OF GRAFF DIVISION OF CERPURATE OF
Effe	ective date <u>if applicable</u> :		DIVISION OF CERPURATE IN
		(no more than 90 days after amendment file date)	2016 OCT -4 PM 2: 19
	e: If the date inserted in this block oument's effective date on the Depart	does not meet the applicable statutory filing requirements, the ment of State's records.	nis date will not be listed as the
Adoption of Amendment(s)		(CHECK ONE)	
	The amendment(s) was/were adopt was/were sufficient for approval.	ed by the members and the number of votes cast for the ame	endment(s)
	There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) v	vas/were
	9/27/2016 Dated		
	Signature(By the chairman	n or vice chairman of the board, president or other officer-if	f directors
	have not been s	elected, by an incorporator - if in the hands of a receiver, trointed fiduciary by that fiduciary)	
	Carlos McD	onald	
		(Typed or printed name of person signing)	
	Evacutiva D	iratar	

(Title of person signing)