## K71342

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## COVER-LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: _	Assisted	Living lesoure	es Inc
	(71342		<u> </u>
The enclosed Articles of Amendm	ent and fee are s	ubmitted for filing.	
Please return all correspondence co	oncerning this m	atter to the following:	
	Stewart (Name of C		
Assisted C	iving (Firm)	company).	Manatee Inc
1500 4th	Aug W. (Ad	dress)	·
Bradenta	(City/ State	34205 and Zip Code)	
For further information concerning	this matter, ple	ase call:	_
Perry Stewart (Name of Contact Person	)	at ( 941 ) 730 (Area Code & Daytime	-4819 (ell) Telephone Number)
Enclosed is a check for the followi	ng amount:		
\$35 Filing Fee		S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street Address	

Amendment Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

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

- المستسسنسين
Articles of Amendment FILED
Articles of Articles of Incorporation  of  Articles of Principal Control of Secretary and 10, 00
of SECRETE
Assisted Living Resources TALLAHASSEE, FLORIDA  (Name of corporation as currently filed with the Florida Dept. of State)
(Ivame of corporation as currently fried with the Florida Dept. of State)
K71342
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
Assisted Living Resources of Manatee Inc.
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
none
(Attach additional pages if necessary)
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
NA

(continued)

The date of each amendment(s) adoption:	_
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were approved by the shareholders. The number of votes can the amendment(s) by the shareholders was/were sufficient for approval.	st for
☐ The amendment(s) was/were approved by the shareholders through voting groups. T following statement must be separately provided for each voting group entitled to vo separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approva	l by
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder and shareholder action was not required.	action
The amendment(s) was/were adopted by the incorporators without shareholder action shareholder action was not required.	n and
Signature  (By a director, president or other officer - if directors or officers 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)	
President (Title of person signing)	

FILING FEE: \$35