

N02 0000004287

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

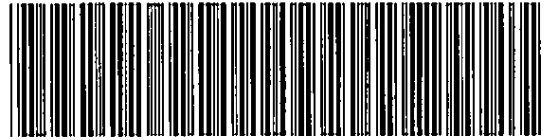
(Business Entity Name)

(Document Number)

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AUG 11 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 10, 2021

COVENANT CHILDREN'S HOME, INC.
11350 N COVENANT PATH, SUITE 100
DUNNELLON, FL 34434

SUBJECT: COVENANT CHILDREN'S HOME, INC.
Ref. Number: N02000004287

We have received your document for COVENANT CHILDREN'S HOME, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker
Regulatory Specialist III

Letter Number: 621A00018992

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Covenant Children's Home, Inc

DOCUMENT NUMBER: N02000004287

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

Please return all correspondence concerning this matter to the following:

Kendalyn U. Green

(Name of Contact Person)

Covenant Children's Home, Inc.

(Firm/ Company)

11350 N. Covenant Path, Suite 100

(Address)

Dunnellon, FL 34434

(City/ State and Zip Code)

kendalyn.green@covenantchildrenshome.org

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kendalyn Green

352

489-2565

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:

- | | | | |
|--|--|--|--|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input checked="" type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment
to
Articles of Incorporation
of

Covenant Children's Home Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N02000004287

(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

The new 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:

N/A

(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:

Name of New Registered Agent:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

_____, 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

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.

<u>X</u> Change	<u>PT</u>	<u>John Doe</u>
<u>X</u> Remove	<u>V</u>	<u>Mike Jones</u>
X Add	SV	Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>Secr</u>	<u>Kemper, Scott</u>	<u></u> <u></u> <u></u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>Exec Dir</u>	<u>Habadank, Otto Ken</u>	<u></u> <u></u> <u></u>
3) <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Secr</u>	<u>Black, Joanne</u>	<u>11350 N Covenant Path</u> <u>Dunnellon, FL 34434</u> <u></u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Exec Dir</u>	<u>Green, Kendalyn U.</u>	<u>11350 N. Covenant Path</u> <u>Dunnellon, FL 34434</u> <u></u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>Bd. Men</u>	<u>Craig, Avis Marie</u>	<u>10995 N. Citrus Ave</u> <u>Crystal River, FL 34428</u> <u></u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	<u></u>	<u></u>	<u></u> <u></u> <u></u>

(attach additional sheets, if necessary). (Be specific)

Scott Kemper has left the board. He has been replaced by Joanne Black.

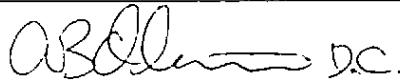
Otto Ken Habadank is no longer Exec. Director. He has been replaced by Kendalyn U. Green.

Avis Marie Craig has been elected to the Board as a director.

☒ 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 July 24, 2021

Signature  D.C.
(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)

Anthony B. Oliverio, D.C.
(Typed or printed name of person signing)

Chairman
(Title of person signing)