

N030000000447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

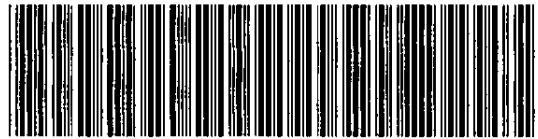
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09 MAY -5 AM 10:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

5/5-09
Quind

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: C.A.R.E.S. HELPS INC

DOCUMENT NUMBER: N 03000000447

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

Please return all correspondence concerning this matter to the following:

MITCHELL E. WALLICK
(Name of Contact Person)

C.A.R.E.S. HELPS
(Firm/ Company)

321 N. LAKE BLVD. #102
(Address)

N. Palm Beach, FL 33408
(City/ State and Zip Code)

For further information concerning this matter, please call:

Mitch Wallick at (954-) 610-1686
(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 &
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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 22, 2009

MITCHELL E. WALLICK
321 N. LAKE BLVD., SUITE 102
N. PALM BEACH, FL 33408

SUBJECT: C.A.R.E.S. HELPS INC.
Ref. Number: N03000000447

We have received your document for C.A.R.E.S. HELPS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document is illegible and not acceptable for imaging.

Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed in ink.

The information about the new officers/directors, must be very clear.

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) 245-6916.

Carol Mustain
Regulatory Specialist II

Letter Number: 909A00013490

Articles of Amendment
to
Articles of Incorporation
of

C.A.R.E.S. Helps, Inc.

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

N03000000447

(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:

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:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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TALLAHASSEE, FLORIDA

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:

New Registered Office Address:

_____ (Florida street address)

_____, Florida
(City) (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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Treas.</u>	<u>Roy I. Schwartz</u>	<u>8358 W. Oakland Pk. Blvd.</u> <u>#2030</u> <u>Sunrise, FL 33351</u>	☒ Add ☐ Remove
<u>D</u>	<u>Nilda Salado</u>	<u>P.O. Box 19674</u> <u>WPB, FL 33416</u>	☒ Add ☐ Remove
<u>D.</u>	<u>Jodi Rosenbaum</u>	<u>1600 NW 56th Drive</u> <u>Coral Springs, FL 33076</u>	☒ Add ☐ Remove
<u>D.</u>	<u>Joe Lopez</u>	<u>7237 S.W. 23rd St.</u> <u>Miami, FL 33027</u>	☒ Add

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

To open, lease, run, operate, sober living and social re-education homes.

To provide rental assistance through scholarships for Housing and other assistance
through scholarships for housing and other assistance to deserving individuals in need
of sober living and life skills, self help, social re-education services or groups, 12 step
programs.

To provide scholarships for treatment, housing and counseling through outside provider
agencies through linkages.

The date of each amendment(s) adoption: April 27, 2009

Effective date if applicable: April 27, 2009

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

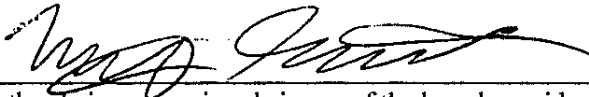
(CHECK ONE)

☒ The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(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 April 27, 2009

Signature



(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)

Mitchell E. Wallick

(Typed or printed name of person signing)

Director

(Title of person signing)