

NO3000007153

(Donor's Name)

Hensley & Co PA Suite 101
9420 Fountain Medical Ct
Bonita Springs FL 34135

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

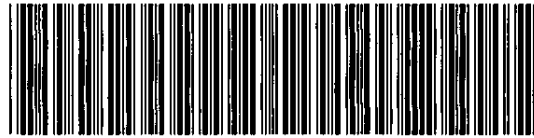
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Corrected document
by telephone call
on 6/16/08

Office Use Only



900128830899

05/09/08--01020--013 **35.00

Amend

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

08 JUN 16 PM 4:07

FILED

Roberts JUN 16 2008



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 19, 2008

HENSLEY & CO PA
9420 FOUNTAIN MEDICAL CT
STE 101
BONITA SPRINGS, FL 34135

SUBJECT: NEW LIFE MEN'S AND WOMEN'S PROGRAM, INC.
Ref. Number: N03000007153

We have received your document for NEW LIFE MEN'S AND WOMEN'S PROGRAM, 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):

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 208A00031655

RECEIVED
2008 JUN 16 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: New Life Men's and Women's Program, Inc.

DOCUMENT NUMBER: N03000007153

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

Please return all correspondence concerning this matter to the following:

Karey Rebello

(Name of Contact Person)

New Life Men's and Women's Program, Inc.

(Firm/ Company)

9420 Fountain Medical Ct, #101

(Address)

Bonita Springs, FL 34135

(City/ State and Zip Code)

For further information concerning this matter, please call:

Karey Rebello

(Name of Contact Person)

at (239) 992-6060

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

New Life Men's and Women's Program, Inc.

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

FILED
08 JUN 16 PM 4:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N03000007153

(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:

NEW CORPORATE NAME (if changing):

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

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

Add: Giuseppe Ciorciaro, 3870 Central Ave, Ft Myers, FL 33901 as Treasurer and Secretary

Add: Robert Sparrow, 1425 Collins Rd, Ft Myers, FL 33901 as Vice President

Change: Philip Anastasi, 2361 Chandler Ave, Ft Myers, FL 33901 from Treasurer to President

Remove: Gaspar Anastasi, 8881 Banyan Cove Cir, Ft Myers, FL 33919 as President

Remove: Michelle Anastasi, 8881 Banyan Cove Cir, Ft Myers, FL 33919 as Vice President

Remove: Annette Scoca, 175 Rolling St, Malverne, NY 11565 as Secretary

Remove: Jill Sparrow, 1425 Collins Rd, Ft Myers, FL 33907 as Treasurer/Director

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: 4-28-08

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.

Signature Philip T. Anastasi
(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.)

PHILIP ANASTASI
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

FILING FEE: \$35