

ND4000006615

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(Address)

(City/State/Zip/Phone #)

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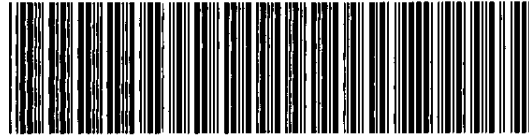
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA

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Amend
Teevis
7-26-11

COVER LETTER

• **TO:** Amendment Section
Division of Corporations

NAME OF CORPORATION: Healing Touch Buddies, Inc.

DOCUMENT NUMBER: N04000006615

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

Please return all correspondence concerning this matter to the following:

Betty Ann Baker

(Name of Contact Person)

Healing Touch Buddies, Inc.

(Firm/ Company)

13901 US Hwy 1 Suite 10

(Address)

Juno Beach, FL 33408

(City/ State and Zip Code)

htbuddiesinc@cs.com

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

For further information concerning this matter, please call:

Betty Ann Baker

(Name of Contact Person)

at (561) 741-1671

(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

Articles of Amendment
to
Articles of Incorporation
of

FILED
11 JUL 25 AM 9:59
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Healing Touch Buddies, Inc.

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

N04000006615

(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)

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)

(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

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>PRES</u>	<u>Maryanne Watson</u>	<u>4500 NW 83RD LN</u> <u>CORAL SPRINGS, FL 33065</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>PRES</u>	<u>Lindsay Babich</u>	<u>956 BEAR ISLAND CIR</u> <u>WEST PALM BEACH, FL 33409</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>VP</u>	<u>Julia Caira</u>	<u>13110 SW 14TH PL</u> <u>DAVIE, FL 33325</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

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

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)

E. (cont.)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
Vice Chair	Patricia Burke	10256 ANDOVER COACH CIR #H1 LAKE WORTH, FL 33409	Add
Secretary	Linda Delprete	20 STONEY DR PALM BEACH GARDENS, FL 33410	Remove
Secretary	Marianne O'Rourke	220 HENTHORNE DR C-12 PALM SPRINGS, FL 33461	Add

The date of each amendment(s) adoption: June, 2011

(date of adoption is required)

Effective date if applicable: July 10, 2011

(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 July 10, 2011

Signature Betty Ann Baker

(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)

Betty Ann Baker

(Typed or printed name of person signing)

Executive Director

(Title of person signing)