

NA5000000214

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Amend

09/28/05--01003--017 **35.00

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05 SEP 28 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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05 SEP 27 PM 4:25
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

DR
9/28/05

X00789, 00524, 00672

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MS. Wheelchair America - Florida, Inc.

DOCUMENT NUMBER: N 05 00 00 0 0 214

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

Please return all correspondence concerning this matter to the following:

Eileen O'Brien
(Name of Contact Person)

PRESIDENT MS WHEELCHAIR AMERICA - FLORIDA, INC.
(Firm/ Company)

2001 OLD ST. AUGUSTINE ROAD #1105
(Address)

Tallahassee, FL 32301
(City/ State and Zip Code)

For further information concerning this matter, please call:

Eileen O'Brien at (950) 414 9225
(Name of Contact Person) (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 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

RECEIVED

05 SEP 28 PM 4:32

DIVISION OF CORPORATION

September 27, 2005

Eileen O' Brien
2001 Old St. Augustine Rd.
M105
Tallahassee, FL 32301

SUBJECT: MS. WHEELCHAIR AMERICA-FLORIDA, INC.
Ref. Number: N05000000214

We have received your document for MS. WHEELCHAIR AMERICA-FLORIDA, 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 back page of this document is missing. I have enclosed a complete non-profit amendment form that you may fill out and return to us.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey
Document Specialist

Letter Number: 505A00058936

9/27/05 CORPORATE DETAIL RECORD SCREEN
NUM: N05000000214 ST:FL ACTIVE/FL NON-PROF FLD: 01/06/2005
NAME : MS. WHEELCHAIR AMERICA-FLORIDA, INC.
PRINCIPAL: 5328 SW CORAL TREE LANE
ADDRESS PALM CITY, FL 34990
RA NAME : CHESNUT, DAVID J
RA ADDR : 215 SW FEDERAL HWY SUITE 101
STUART, FL 34994 US
ANN REP : * NONE FILED *

4:31 PM

1. MENU, 3. OFFICERS

ENTER SELECTION AND CR:

Articles of Amendment
to
Articles of Incorporation
of

MS. WHEELCHAIR AMERICA - FLORIDA

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

NO 5000000 214

(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**)

II THE BUSINESS AND MAILING ADDRESSES SHALL
BE CHANGED TO 2001 OLD ST.
AGRESTINE ROAD, # M105, TALLAHASSEE,
FLORIDA 32301

IV. THE BOARD OF DIRECTORS SHALL SOLELY
BE COMPRISED OF:

Eileen O'Brien

2001 OLD ST. AGRESTINE ROAD, # M105
TALLAHASSEE, FL 32301

TANA ZWAGER shall no longer be an officer or director.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

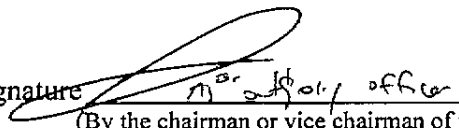
The date of adoption of the amendment(s) was: 8/15/05

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


(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.)

TAM ZWEDER

ELLEN O'BRIEN

(Typed or printed name of person signing)

PRESIDENT 

(Title of person signing)

FILING FEE: \$35