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SECRETARY OF STATE

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MAY 2.1 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATIO	N: Tampa	Bay Insti	tute for	Psychoanalytic	Studies, Ir
DOCUMENT NUMBER: _	NO 500	0000 803	٦		
The enclosed Articles of Amo	e ndment and fee ar	re submitted for fi	ling.		
Please return all corresponde	nce concerning this	s matter to the foll	lowing:		
·	N. P. VENHOLB		·		
L ALEXANDE	R-GUERRA; M.D.	(Name of C	Contact Person)		
		(Firm/	Company)		
Tampa Ba for Psychoanal 13919 Carrolwo	rtic Studies, In	IC.			
Tampa, l	FL 33618 08-5080		ddress)		
		(City/ State	and Zip Code)		·
thins	titute ps	a studie	s @ 90	nail-com	
E-	mail address: (to b	e used for future	annual report no	otification)	
For further information conce	erning this matter, p	olease call:			
L ALEX	ANDER-GUERRA, M.	D.	at 8	13 -908 - 508	0
	Name of Contact I		(Area	13 - 908 - 5080 a Code) (Daytime Telepho	one Number)
Enclosed is a check for the fo	llowing amount ma	ade payable to the	e Florida Depart	ment of State:	
🛛 \$35 Filing Fee	□\$43.75 Filing F Certificate of St	tatus Certified	l Copy nal copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)	
P.O. Box 6	t Section Corporations		Division Clifton E 2661 Exc	nent Section of Corporations	

2015 MAY 15 AH 10:58 of Amendment to Articles of Incorporation SECRETARY OF STATE of

(nc

TATTA METER BOY	'Institute	for	Psychoanalytic Studies
(Name of Corporation as curren	tly filed with tl	e Flor	ida Dept. of State)
NO 50000	08039		·
(Document Number	er of Corporation	n (if kr	nown)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	s, this <i>Florida i</i>	Vot Foi	r Profit Corporation adopts the following
A. If amending name, enter the new name of the corporati	on:		
NA			The new
name must be distinguishable and contain the word "corporat "Company" or "Co." may not be used in the name.	ion" or "incorp	orated	" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	NA	•	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		•	
			The suite of the
	<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA		Project Control of Second Control
	·		
O. If amending the registered agent and/or registered offic	e address in Fl	orida. e	enter the name of the
new registered agent and/or the new registered office ac			
Name of New Registered Agent:	NA		
			to the surface of the
New Registered Office Address:		(Flo	rida street address)
			. Florida
	(City)		, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered .			
hereby accept the appointment as registered agent. I am fan	uliar with and o	iccept t	he obligations of the position.
Sig	gnature of New	Registe	red 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)

Please note the officer/director title by the first letter of the office title:

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.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	5.	Address
1) Change			VA	
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove	·			· · · · · · · · · · · · · · · · · · ·
4) Change				•
Add [.]				
Remove				
5) Change				
Add				
Remove				
6) Change				<u> </u>
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
We want to add three words "direct services and" to Art. 11
Sect. 6 so it reads:
· · · · · · · · · · · · · · · · · · ·
AYLIV Section 6: To offer educational programs and treatment
to the general public through direct services and
referrals for low cost treatment
- · · · · · · · · · · · · · · · · · · ·
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The date of each amendment(s) adoption: 5-11-15 if other than the date this document was signed. 5-11-15
(no more than 90 days after amendment file date) Effective date if applicable: Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records 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 Huyandu-Gurn 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)

L ALEXANDER-GUERRA, M.D.

(Typed or printed name of person signing)

President, board of directors, TBIPS
(Title of person signing)

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