NO(0000011142

Assisted Recovery, Inc. 9853 North Tamiami Trail, Ste. 213 Naples, FL 34108
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:





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FLORIDA DEPARTMENT OF STATE Division of Corporations

May 30, 2007

ASSISTED RECOVERY, INC. 9853 NORTH TAMIAMI TRAIL STE 213 NAPLES, FL 34108

SUBJECT: ASSISTED RECOVERY, INC.

Ref. Number: N06000011142

We have received your document for ASSISTED RECOVERY, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please list title of signing officer.

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 **Document Specialist**

Letter Number: 307A00037137

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Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

FILED 07 JUN -6 PM 12: 08 SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

> **Articles of Amendment** to **Articles of Incorporation**

(Name of corporation as currently filed with the Florida Dept. of State) (Document number of corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Vot For **Profit Corporation** adopts the following amendment(s) to its Articles of Inco poration:

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 SPE CIFIC)

Delete DS Nancy Seavey

Add: D Bob Riley 6470 Bottle Brush Lane

Naples, FL 34109

Delete D Sandra Crosby

Add: D Steven Wodzinski 28200 Pine Haven Wav #51 Bonita Springs, FL 34135

Add: DT Craig King 10630 McGregor Blvd. Ft Myers, FL 33919

The date of adoption of the amendment(s) was: 05/21/2007 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 m mber of

for the amendment was sufficient for approval.

• There are no members or members entitled to vote on the amenda ent. The amendment(s) was (were) adopted by the board of directors.

Signature 2

(By the chairman or vice chairman of the board, president or other officer- if directors have 1 ot been selected, by an incorporator- if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

(Typed or printed name of person signing)

(Title of person signing)

FILING FEE: \$35