

No6 0000 12969

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(City/State/Zip/Phone #)

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(Business Entity Name)

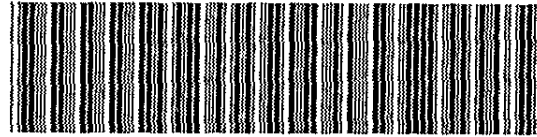
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMEND & RC
1/23/07



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 18, 2007

SHELIA MUTASCIO
2607 N.E. 8TH AVE #13
WILTON MANORS, FL 33334

SUBJECT: AGING IN PLACE CORP.
Ref. Number: N06000012969

We have received your document for AGING IN PLACE CORP. 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) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 207A00004092



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 8, 2007

SHEILA MUTASCIO
AGING IN PLACE CORP
2607 NE 8TH AVENUE #13
WILTON MANORS, FL 33334

SUBJECT: AGING IN PLACE CORP.
Ref. Number: N06000012969

We have received your document for AGING IN PLACE CORP., however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$6.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 207A00001471

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Aging In Place Corp (A Nonprofit Corporation)

DOCUMENT NUMBER: N06000012969

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

Please return all correspondence concerning this matter to the following:

Sheila Mutascio

(Name of Contact Person)

Aging In Place Corp (A Nonprofit Corporation)

(Firm/ Company)

2607 N.E. 8th Ave. - #13

(Address)

Wilton Manors, FL 33334

(City/ State and Zip Code)

For further information concerning this matter, please call:

Sheila Mutascio

(Name of Contact Person)

at (954) 822-2161

(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

FILED
07 JAN 23 PM 2:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Amendment
to
Articles of Incorporation
of

Aging in Place Corp. (A Nonprofit Corporation)

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

N06000012969

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A.")

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

Address Change - 2607 N.E. 8th Ave - #13 - Wilton Manors, FL 33334

principal and mailing address and Registered Agent's address

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

FILING FEE: \$35

Signature _____
(By a director, president or other officer - If directors or officers have not been selected by an incorporator - If in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Sheila Mutascio
(Typed or printed name of person signing)

(Title of person signing)
Secretary

- ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- _____
(voting group)
- "The number of votes cast for the amendment(s) was/were sufficient for approval by _____"
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

Adoption of Amendment(s) (CHECK ONE)

Effective date if applicable: 12-27-2006
(no more than 90 days after amendment the date)

The date of each amendment(s) adoption: 12-27-2006