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COVER LETTER

• TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: The Good She	pard of I	Northeast Flo	orida Inc.
DOCUMENT NUMI	BER: N070000002900			
The enclosed Articles	of Amendment and fee are sub	mitted for fi	ling.	
Please return all corre	spondence concerning this matt	er to the foll	lowing:	
	Blond	ell Johnso	n	
	(Name of	Contact Pers	son)	
	The Good Shepard of	f Northeas	t FL Incorporat	ted
	(Firm	/ Company)		
	1033 NV	V Kimberly	[,] Rd	
	(A	Address)		
	Lake City	, Florida 3	2055	
	(City/ Stat	e and Zip Co	ode)	
	johnson112 E-mail address: (to be used			fication)
For further information	n concerning this matter, please	call:		
Blondell Johnson		at (3	386 _{) 755-3}	110
(Name o	of Contact Person)	(Area Code & Day	rtime Telephone Number)
Enclosed is a check fo	r the following amount made pa	ayable to the	Florida Departm	ent of State:
□\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	Certified	5 Filing Fee & l Copy nal copy is d)	☑ \$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 Sectior Division of Corpora Clifton Building 2661 Executive Cer Fallahassec, FL 323	ations ater Circle



Articles of Amendment Articles of Incorporation

ASECTOR SEC. PESTATE

THE GOOD SHEPARD OF NORTHEAST FLORIDA, INC.

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

N07000002900

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

S)	
fice address in Florida, ente	
fice address in Florida, ente	
address:	r the name of th
	-
(Florida street address)	
(City)	, Florida (Zip Code)
d Agent: am familiar with and accept	
	lorida street address) (City)

Page 1 of 3



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>	Type of Action
Sec	Clyde Anderson	4451 NW Madison Street	
		Lake City, FL 32055	
Tre	Clyde Douglas	PO Box 2711	
		Lake City, FL 32056	☐ Remove
	Bernard George	1240 Lake Jeffery Road	🗹 Add
		Lake City, FL 32055	Remove
	nding or adding additional Articles additional sheets, if necessary). (B		
Article IV	/. 4.4 (Amending) The presider	nt of the board shall remain in offic	ce for two (2)
		in office shall be one (1) year in th	
<u>,</u>	,		
			····
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The date of each amendme	ent(s) adoption: January 27, 2010
Effective date <u>if applicabl</u> e	(date of adoption is required)
	(no more than 90 days after amendment file date)
Adoption of Amendment(s	s) (<u>CHECK ONE</u>)
☑ The amendment(s) was/ was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) pproval.
There are no members of adopted by the board of	or members entitled to vote on the amendment(s). The amendment(s) was/were directors.
Dated_Ja	nuary 28, 2010
Signature	Deborah Marelead
h	By the chairman or vice chairman of the board, president or other officer-if directors ave not been selected, by an incorporator – if in the hands of a receiver, trustee, of ther court appointed fiduciary by that fiduciary)
	Deborah Morehead
	(Typed or printed name of person signing)
	President
	(Title of person signing)