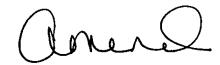
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(Red	questor's Name)	
(Add	Iress)	
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(Add	lress)	
(City	/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
		
(Bus	iness Entity Nam	ıe)
(Doc	ument Number)	
Certified Copies	Certificates	of Statue
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Special Instructions to F	iling Officer:	
	<u>.</u>	

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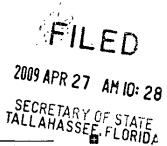
AOR 5/4/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>NEV</u>	V LIFE CENTER, INC.	
DOCUMENT NUMBER: N090000	002295	
The enclosed Articles of Amendment	and fee are submitted for filing	.
Please return all correspondence conc	erning this matter to the follow	ing:
WENDELL DEHANE		
	(Name of Contact Person)	
NEW LIFE CENTER,	INC. (Firm/ Company)	
7680 PEMBROKE R	OAD (Address)	
MIRAMAR, FL 33023	(City/ State and Zip Code)	<u>-</u>
For further information concerning th	•	
WENDELL DEHANEY (Name of Contact Person)		987-2645 & Daytime Telephone Number)
Enclosed is a check for the following	`	•
✓ \$35 Filing Fee	ee & \$43.75 Filing Fe	e & \$\int_ \\$52.50 \text{ Filing Fee} \\ \text{Certificate of Status}
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Sec Division of Corp Clifton Building 2661 Executive Tallahassee, FL	porations Center Circle

Articles of Amendment to Articles of Incorporation of



NEW L	IFE CENTER, INC.	TALLAHASSEE
(Name of Corporation as curre	ntly filed with the Florida Dept. of S	State)
	109000002295	
(Document Num	ber of Corporation (if known)	
ursuant to the provisions of section 617.1006, I be following amendment(s) to its Articles of Inc.		Profit Corporation
If amending name, enter the new name of	the corporation:	
he new name must be distinguishable and co bbreviation "Corp." or "Inc." <u>"Company" or</u>		ncorporated" or the
. Enter new principal office address, if appl		
Principal office address <u>MUST BE A STREET</u>	TADDRESS)	
(Mailing address <u>MAY BE A POST OFFIC</u>	<u>—————————————————————————————————————</u>	
. If amending the registered agent and/or re		nter the name of th
new registered agent and/or the new registered	tered office address:	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address:	(Florida street address)	
New Registered Office Address:	(Florida street address)	, Florida
New Registered Office Address:	(Florida street address) (City)	, Florida (Zip Code)

Page 1 of 3

Signature of New Registered 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) **Title** <u>Name</u> Address Type of Action LINCOLN SMILEY S 7832 TROPICANA ST 🖪 🚨 Add MIRAMAR, FL 33023 Remove <u>S_____</u> **PHILLIP WRIGHT** 8724 S. HAMPTON DR. . . . Add MIRAMAR FL 33025 Remove ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: 03-25-2009		
Effective date <u>if applicable</u> :	03-25-2009	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.	
There are no members or adopted by the board of dis	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
Dated_03-2	25-2009	
hav	the chairman or vice chairman of the board, president or other officer-if directors e not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
	WENDELL DEHANEY (Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	
	(Title of person signing)	

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