N09000007857

(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
/Duning and Fullish Allows	
(Business Entity Name)	
	<u>. </u>
(Document Number)	
Certified Copies Certificates of Status	
Certified copies Certificates of status	
	_
Special Instructions to Filing Officer:	
,	
·	

Office Use Only



300159911823

09/04/09--01026--010 **35.00

99 SEP - 4 AH 10: 41
SEGRETARY OF STAFE
TACLAHASSEC.FLURID.

N.C.
COULLIETTE

SEP 1 0 2009

EXAMINER

COVER LETTER

TO: Amendment Section **Division of Corporations** na Angels of Lauderhil The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State:

Mailing Address

\$35 Filing Fee

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

☐ \$43.75 Filing Fee &

Certificate of Status

Street Address

□ \$43.75 Filing Fee &

(Additional copy is

Certified Copy

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□ \$52.50 Filing Fee

Certificate of Status

Certified Copy

is enclosed)

(Additional Copy

Articles of Amendment

to Articles of Incorporation

pts
u English
टाज्यास् स. प्र
Care Long
an article
-1.4127
he

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) Address **Type of Action** <u>Title</u> <u>Name</u> ☐ Add ☐ 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) a	doption:
• •	(date of adoption is required)
Effective date <u>if applicable</u> :	a.s.a.p.
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ad was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were rs.
DatedSignature	194,2,2009 Vitarie D. Biles
(By the chave not	chairman or vice chairman of the board, president or other officer-if directors to been selected, by an incorporator — if in the hands of a receiver, trustee, or our appointed fiduciary by that fiduciary)
	Patricia D. Biles (Typed or printed name of person signing)
	President
	(Title of person signing)

Page 3 of 3