N11000002443

(Requestor's Name)				
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C.COULLIETTE

MAY 26 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: The Life Cent	er of Palm Beach Coun	ity, Inc.
DOCUMENT NUM	IBER: N11000002443		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
***************************************	· · · · · 	nes Easley	
	(Name of	f Contact Person)	
	The Life Center of	Palm Beach County, Inc.	
	(Firm	n/ Company)	
	1548	3 6th Street	
	(Address)	
	West Palm	Beach, FL 33401	
	(City/ Sta	te and Zip Code)	
		01@yahoo.com ed for future annual report notific	cation)
For further informati	on concerning this matter, pleas	e call:	
James Easley		at (561) 201-57	52
(Name	of Contact Person)		me Telephone Number)
Enclosed is a check f	or the following amount made p	payable to the Florida Departmen	nt of State:
☑ \$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 Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	er Circle

Articles of Amendment to **Articles of Incorporation**

The Life Center of Palm Beach County, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N11000002443 (Document Number of Corporation (if known) Pursuant to the provisions of section 617.1006, Florida Statutes, this Florida Not For Profit Corporation adopts

the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent: New Registered Office Address: (Florida street address) , Florida_ (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the

position.

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being moved and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
<u> </u>			Add Remove
			_ ☐ Add ☐ Remove
E. <u>If amendin</u> (attach addi Article III	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific		
a. We are or	ganized exclusively for charitable,	religious, education and sci	entific purposes.
****	antial part of the activities of this co	•	
on propagan	nda, or otherwise attempting to influ	uence legislation, and the co	rporation shall
not participa	te or intervene in any political cam	paign (including the publishi	ng or distribution
	s) on behalf of any candidate for p		
gage in any	other activity that is not permitted t	by section 501(c)(3) of the IF	RS Code.
c. No part of	f the net income or net assets of th	e corporation shall inure to t	the benefit of,
or be distribu	utable to, its directors, officers, mer	mbers or other private perso	ns. However,
the corporati	ion is authorized to pay reasonable	compensation for services	actually rendered
and to make	payments and distributions in furth	nerance of its tax-exempt pu	irposes.
	dissolution of the corporation, all of		
of the corpo	ration remaining after payment, or	provision of payment of all d	 lebts and liabilities
of this corpo	ration, shall be distributed to a non	profit fund, foundation, or co	prporation which is
organized ar	nd operated exclusively for tax-exe	mpt purposes which has est	ablished its
tax-exempt s	status under section 501(c)(3) of th	e Internal Revenue Code.	

The date of each amendment(s) adoption:	April 12, 2011
Effective date if applicable:	(date of adoption is required) April 12, 2011
(no m	ore than 90 days after amendment file date)
Adoption of Amendment(s)	CHECK ONE)
The amendment(s) was/were adopted by the was/were sufficient for approval.	he members and the number of votes cast for the amendment(s)
There are no members or members entitle adopted by the board of directors.	ed to vote on the amendment(s). The amendment(s) was/were
Dated April 12,	2011
Signature	
have not been sele	or vice chairman of the board, president or other officer-if directors cted, by an incorporator – if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary)
	James Easley
Т)	yped or printed name of person signing)
	President
	(Title of person signing)

Page 3 of 3