N11000010896

(Requestor's Name)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
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Certificate Copies Certificates of Status	
Special Instructions to Filing Officer:	٦
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 189301 4313323

AUTHORIZATION :

COST LIMIT : \$\(\frac{\xi}{2}\).50

ORDER DATE: December 7, 2022

ORDER TIME : 2:40 PM

ORDER NO. : 189301-005

CUSTOMER NO: 4313323

DOMESTIC AMENDMENT FILING

NAME: NAPLES SENIOR CENTER AT JFCS,

INC.

EFFECTIVE DATE:

ARTICLES OF AMENDMENT
XX RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

___ PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER'S INITIALS:

COVER LETTER

TO: Amendment Section **Division of Corporations**

NAPLES SENIOR CENTER AT JFCS, INC.			
N11000010896 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Charles M. LeSchack			
(Name of Contact Person)			
Cummings & Lockwood LLC			
(Firm/ Company)			
Six Landmark Square, 9th Floor			
(Address)			
Stamford, CT 06901			
(City/ State and Zip Code)			
cleschack@cl-law.com			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Charles M. LeSchack 203 351-4418			
(Name of Contact Person) (Area Code) (Daytime Telephone Number)			
Enclosed is a check for the following amount made payable to the Florida Department of State:			
☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status (Additional copy is enclosed) ☐ \$35 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status (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** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

FILEI

Articles of Amendment to Articles of Incorporation

2022 DEC -7 PM 12 16

NAPLES SENIOR CENTER AT JFCS, INC.

(Name of Corporation as currently filed with the Florida	Dept. of State)	
NI	1000010896	
(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following	
A. If amending name, enter the new name of the corporate BAKER SENIOR CENTER NAPLES, INC.	tion: The new	
name must be distinguishable and contain the word "corpora "Company" or "Co." may not be used in the name.	ntion" or "incorporated" or the abbreviation "Corp." or "Inc."	
B. Enter new principal office address, if applicable:	6200 Autumn Oaks Lane	
(Principal office address MUST BE A STREET ADDRESS	Naples, FL 34119	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same As Above	
D. If amending the registered agent and/or registered offinew registered agent and/or the new registered office a	ce address in Florida, enter the name of the	
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fai	Agent: miliar with and accept the obligations of the position.	
Si	gnature 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)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X_Change X_Remove X_Add	PT John Do V Mike Jo SV Sally So	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add			
Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove		_	
5) Change Add			
Remove		_	
6) Change Add			
Remove		_	
E. If amending or adding (attach additional sheet)	g additional Artic s, if necessary).	cles, enter change(s) here: (Be specific)	

		_ _
		
		
		
		
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The date of each amendment(s) adopt date this document was signed.	otion:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will not be timent of State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	oted by the members and the number of votes cast for the amendment(s)	

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.				
Dated November 30, 2022				
Signature (By the chairman or vice chairman of the board, president of the bo	or other officer-if directors			
have not been selected, by an incorporator – if in the hands other court appointed fiduciary by that fiduciary)	s of a receiver, trustee, or			
Dr. Jaclynn Faffer (Typed or printed name of person	on signing)			
President / CEO				
(Title of person sign:	ing)			