(Req	uestor's Name)	
(Add	ress)	·
(Add	ress)	
(City	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nar	ne)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



500236596965

06/22/12--01030--015 \*\*35.00

SECRETARY SECRET

Amend, 2

# **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: BD NON-Emergency Medical Transportation, INC:

DOCUMENT NUMBER: N 12000002676 / Letter # 012 A 00017309 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BD NON-Emergency Medical Transportation, Inc 2301 NW 41St Ave #310
(Address) LAuderhill, FL 33312
(City/State and Zip Code) E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 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 Certificate of Status Certified Copy N1200002676 (Additional copy is Certified Copy L# 0124000 17309 enclosed) (Additional Copy is Enclosed) Street Address Ament Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301



July 10, 2012

BADILLA DAGOBERT 2301 NW 41ST AVE #310 LAUDERHILL, FL 33313 **3RD MAILING** 

SUBJECT: BD NON-EMERGENCY MEDICAL TRANSPORTATION, INC.

Ref. Number: N12000002676

We have received your document for BD NON-EMERGENCY MEDICAL TRANSPORTATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 012A00017309



July 9, 2012

BADILLA DAGOBERT 2301 NW 41ST AVE #310 LAUDERHILL, FL 33312 2nd mailing

SUBJECT: BD NON-EMERGENCY MEDICAL TRANSPORTATION, INC.

Ref. Number: N12000002676

We have received your document for BD NON-EMERGENCY MEDICAL TRANSPORTATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 012A00017309

Irene Albritton Regulatory Specialist II

www.sunbiz.org



June 22, 2012

BADILLA DAGOBERT 2301 NW 41 AVE #310 LAUDERHILL, FL 33312

SUBJECT: BD NON-EMERGENCY MEDICAL TRANSPORTATION, INC.

Ref. Number: N12000002676

We have received your document for BD NON-EMERGENCY MEDICAL TRANSPORTATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 012A00017309

# Articles of Amendment to Articles of Incorporation of

BD NON-Emergency Medic		
(Name of Corporation as currently filed with the	Florida Dept. of State)	
Kef NO N1200002676 (Document Number of Con		
(Document Number of Cor	rporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Staamendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopt	s the following
A. If amending name, enter the new name of the corpo	oration;	•
NA		The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporated" or the abbreviation "Co	rp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)	
		- to still
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	JUL 19
		12 JUL 19 PM 1: 26
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		26
Name of New Registered Agent:	NA	
New Registered Office Address:	(Florida street address)	
	, Florida	
(C	City) (Zip Code)	
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I are		tion.
<b>1</b>	1/A-	
- Signature of New R	Registered Agent, if changing	

Page 1 of 4

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	<u>PT</u>	John Doc	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove		NA	
2) Change Add Remove	<u>.</u>	NA	
3 ) Change Add Remove		NA	
4) Change Add Remove	<u> </u>	NA	
5) Change Add Remove	<del></del> -	NA	
6) Change Add Remove		NA	

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Article III
Said Organization is organized exclusively for
Charitable, religious, educational and Scientific
Purposes, including, for such purposes, the making of
distributions to Organizations that qualify as exempt
Organizations under section SOI(c)(3) of the Internal
fevenue Code, or Corresponding section of any Future
federal tay code.
Article VIII
Upon the dissolution of the organization, assets shall be distributed
for one or more exempt purposes within the Meaning of Section 501
(c)(3) of the Internal Levenge Code, or Corresponding Section of any
Future federal tax code, or shall be distributed to the federal govern-
ment, or to a state or Locale government, for a public purpose,
Any such assets not disposed of Shall be disposed of by the Court
of Competent Jurisdiction of the County in which the principal
office of the Organization is then located, exclusively for such
Purposes of to such organization or organizations, as said Court
Shall determine, which are organized and Operated exclusively
for such purposes.
)

# AMENDMENT TO ARTICLES OF INCORPORATION

## BD NON-EMERGENCY MEDICAL TRANSPORTATION, INC.

### Article III

Said organization is organized exclusively for charitable, religious, educational, and scientific purposes, including, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code.

### Article VIII

Upon the dissolution of the organization, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government, for a public purpose. Any such assets not disposed of shall be disposed of by the Court of Competent Jurisdiction of the county in which the principal office of the organization is then located, exclusively for such purposes or to such organization or organizations, as said Court shall determine, which are organized and operated exclusively for such purposes.

Adopted June 12, 2012

Badilla Dagobert President

State Of Florida County of Broward

I hereby certify that on this day, before me, an officer duly authorized in the State and in the county aforesaid to take acknowledgments, personally appeared Badilla Dagobert to me known to be the person described in and who executed the foregoing instrument and she acknowledged before me that she executed the same.

Witness my hand and official seal in the County and State last aforesaid this 12th day of June 2012

SEAL

NOTARY PUBLIC STATE OF FLORIDA
Joe K. Harris
Commission # DD920653
Expires: DEC. 03, 2013
BONDED THRU ATLANTIC BONDING CO., INC.

Notary, Joe K. Harry

Joe K. Harris Commission #DD920653 Expires Dec, 03, 2013

The date of each amendment(s) adoption: June 12, 2012
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
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 June 12,2012
Signature Wolfra Dig Olev
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Badilla Dagobert
(Typed or printed name of person signing)  President
President
(Title of person signing)