N12000004491

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Amend
@ 3/12/14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Zion Cares, Inc.

DOCUMENT NUMBER: N12000004491

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carol P. Gordon
(Name of Contact Person)

Zion Cares, Inc.
(Firm/ Company)

1401 Old Bainbridge Road
(Address)

Tallahassee, FL 32303
(City/ State and Zip Code)

crpgordon@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol P. Gordon at (850) 264-3057
(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 & 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Zion Cares

(Name of Corporation as currently filed with the Florida Dept. of State)

N12000004491

(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:**

NA *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:** NA
(Principal office address MUST BE A STREET ADDRESS)

C. **Enter new mailing address, if applicable:** NA
(Mailing address MAY BE A POST OFFICE BOX)

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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: NA

(Florida street address)

New Registered Office Address:

NA, 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

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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	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change ___ Add X Remove	T	Elizabeth Mack	814 Elizabeth Drive Tallahassee, FL 32303
2) X Change ___ Add ___ Remove	D	Anton G. Elwood	3640 Biltmore Road Tallahassee, FL 32311
3) X Change ___ Add ___ Remove	P	Carol P. Gordon	7033 Spicewood Lane Tallahassee, FL 32312
4) ___ Change X Add ___ Remove	D	Shana Brown	755 Sparkleberry Blvd Quincy, Fl 32351
5) ___ Change X Add ___ Remove	T	Winifred Bishop	501 Blairstone Road Apt #3001 Tallahassee, FL 32301
6) ___ Change X Add ___ Remove	VP	Brenda Christie	1211 Limestone Street Tallahassee, FL 32311

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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.

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Example:

X Change	PT	John Doe
X Remove	V	Mike Jones
X Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) ___ Change	D	Leroy Garrison	305 Sandy Creek Rd.
X Add			Havana, FL 32333
___ Remove			
2) ___ Change	S	Barbara Clayton	8117 Old St. Augustine Road
X Add			Tallahassee, FL 32311
___ Remove			
3) ___ Change			
___ Add			
___ Remove			
4) ___ Change			
___ Add			
___ Remove			
5) ___ Change			
___ Add			
___ Remove			
6) ___ Change			
___ Add			
___ Remove			

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E. <u>If amending or adding additional Articles, enter change(s) here</u>:
(*attach additional sheets, if necessary*). (*Be specific*)

Article IV, Section 1: The board shall consist of a minimum of five directors.

Article IV, Section 5: A quorum must be attended by at least 75 percent (4) of the directors before business can be transacted or motions can be made or passed.

Article IV, Section 7: There shall be four officers of the board consisting of a President, Vice President, Secretary and Treasurer.

Article V, Section 2: The four officers serve as the members of the executive committee.

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The date of each amendment(s) adoption: March 4, 2014, if other than the date this document was signed.

Effective date if applicable: March 4, 2014

(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- [x] 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 March 7, 2014

Signature ______________________

(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)

Carol P. Gordon

(Typed or printed name of person signing)

President

(Title of person signing)