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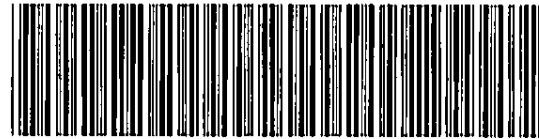
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Transitions Life Center & Community, Inc.

DOCUMENT NUMBER: N12000004549

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

Please return all correspondence concerning this matter to the following:

Lucy Martelli-Johnson
(Name of Contact Person)

Transitions Life Center & Community
(Firm/ Company)

PO Box 236
(Address)

Ocala, FL 34471
(City/ State and Zip Code)

info@tlcocala.org
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Linda Paglia at (352) 266-2073
(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:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input checked="" type="checkbox"/> \$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

Transitions Life Center & Community, Inc.

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

N12000004549

(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)

3360 NW Gainesville Rd

Ocala, FL 34475

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 236

Ocala, FL 34471

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:

Michael A. Paglia

8285 SE 3rd Ct

(Florida street address)

New Registered Office Address:

Ocala

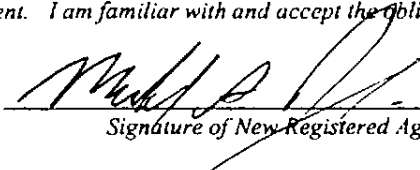
(City)

Florida 34480

(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 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Michael D. Paglia</u>	<u>5960 SE 13th AVE</u> <u>Ocala, FL 34480</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Claudia Bouvier</u>	<u>1085 SE 52nd CT</u> <u>Ocala, FL 34471</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Tracy Bravo</u>	<u>3940 SE 14th Pl.</u> <u>Ocala, FL 34471</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Andrea Cunningham</u>	<u>332 N McGowan Ave</u> <u>Crystal River, FL 34429</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>D</u>	<u>Thomas Fontana</u>	<u></u> <u></u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D</u>	<u>Ginger Broslat</u>	<u>10239 Addison Way</u> <u>Apt. 2106</u> <u>Seminole, FL 33772</u>

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

See attached - Full print out of amended articles

June 18, 2019

The date of each amendment(s) adoption: _____ if other than the date this document was signed.

June 18, 2019

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

July 11, 2019

Dated

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)

James Darren Ritch

(Typed or printed name of person signing)

President, Transitions Life Center & Community

(Title of person signing)

**Articles of Incorporation
of
Transitions Life Center & Community, Inc

Florida Non-Profit Corporation**

**Article I
Corporate Name**

The name of this corporation is TRANSITIONS LIFE CENTER & COMMUNITY, INC., hereinafter referred to as the "Corporation". The Corporation's principal office address is located at 3360 NW Gainesville Road, Ocala, Florida 34475 and mailing address is PO Box 236, Ocala, Florida 34478

**Article II
Corporate Nature**

This is a non-profit Corporation, said organization is organized exclusively for the 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 III
Purposes**

The primary purpose for which this Corporation is formed is to enrich the lives of adults with intellectual and/or developmental disabilities. No part of the net earnings of the corporation shall inure to the benefit of, or be distributable to its members, trustees, officers or other private persons, except that the corporation shall be authorized and empowered to pay reasonable compensation for services rendered and to make payments and distributions in furtherance of the purpose of this corporation.

Article IV

Organization

The Corporation is organized to operate exclusively to receive, hold, invest, and administer property and to make expenditures to or for the benefit of adults with intellectual and/or developmental disabilities.

Notwithstanding any other provisions of these Articles of Incorporation and Bylaws, this Corporation is organized exclusively for adults with intellectual and/or developmental disabilities, 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 the corresponding section of any future federal tax code.

The Corporation shall operate as a Corporation not for profit under Chapter 617, Florida Statutes, and as an exempt organization under Section 501(c)(3) of the Internal Revenue Code of 1954, as may be amended from time to time. No substantial part of the activities of the Corporation shall be the carrying on or propaganda, or otherwise attempting to influence legislation, and the Corporation shall not participate in, or intervene in (including the publishing or distribution of statements) any political campaign on behalf of or in opposition to any candidate for public office. Notwithstanding any other provision of these articles, the Corporation shall not carry on or other activities not permitted to be carried on (a) by a Corporation exempt from federal income tax under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, or (b) by a Corporation, contributions to which are deductible under section 170(c)(2) of the Internal Revenue Code, or the corresponding section of any future federal tax code.

Article V

Membership

The Corporation may have classes of membership as determined by the Board of Directors.

Article VI

Duration

The term of existence of the Corporation is perpetual unless sooner dissolved as provided by law.

Article VII

Directors

Board of Directors. The affairs of the Corporation shall be managed by a Board of Directors of not less than four directors. Their number, qualifications, terms of office and manner of selection shall be stated by the By-Laws of the Corporation duly adopted by the members.

Directors will be elected annually in June or as terms are completed as stated in the by laws.

Active founder(s) have all rights and privileges as stated in the by laws.

Article VIII

Duration

The names and residence addresses of the subscribers and incorporators of this charter are:

Michael A. Paglia – 8285 SE 3rd Court, Ocala, FL 34480

Article IX

Initial Officers

The names of the officers who are to manage the affairs of this Corporation until the first annual meeting of the Corporation are:

Michael A. Paglia	Stephen H. MacKenzie
Linda L. Paglia	Phyllis B. MacKenzie

Article X

Initial Registered Agent and Office

A. The street address of the initial registered office of the Corporation is : 8285 SE 3rd Court, Ocala, FL 34480.

B. The name of the initial registered agent of the Corporation at the Corporation's initial registered office is: Michael A. Paglia.

Article XI
ByLaws

The Corporation shall have the Bylaws consistent with these Articles of Incorporation. The Bylaws of the Corporation are to be made, amended or rescinded by the Board of Directors as set forth in the Bylaws.

Article XII
Amendment to Articles of Incorporation

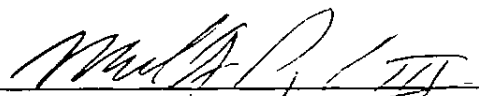
Amendments to the Articles of Incorporation of the Corporation may be adopted, amended or rescinded by a two-thirds vote of the board of directors. This vote will occur at the next regularly scheduled meeting of the board of directors that follows the meeting in which the amendment is read.

Article XIII
Dissolution

Upon the dissolution of the Corporation, or the winding up of its affairs, the board of directors shall, after paying or making provision for the payment of all the liabilities of the Corporation, distribute for one or more exempt purposes within the meaning of 501(c) of the Internal Revenue Code, or the corresponding section of any future federal tax code, all of the remaining assets to one or more organizations with a similar mission and purpose of TLC, to serve the needs of individuals with intellectual and/or developmental disabilities.

IN WITNESS WHEREOF, these Amended Articles of Incorporation have been executed this _18_ Day of June, 2019.

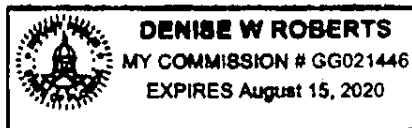
TRANSITIONS LIFE CENTER & COMMUNITY, INC

BY: 
Michael A. Paglia, III, Incorporator

STATE OF FLORIDA

COUNTY OF MARION

The foregoing instrument was acknowledged before me on the 11th day of July, 2019 by Michael A. Paglia, Incorporator of Transitions Life Center & Community, Inc., who is personally known to me or has produced _____ as identification.



Denise W. Roberts
NOTARY PUBLIC
Denise Roberts

CERTIFICATE OF ACCEPTANCE OF REGISTERED AGENT

Having been designated as the Registered Agent for TRANSITIONS LIFE CENTER & COMMUNITY, INC., I hereby accept the designation and agree to act as the Registered Agent of said Corporation.

DATED this 11th day of July, 2019.

Michael A. Paglia, III
Michael A. Paglia, III