

N12000006372

(Requestor's Name)

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| Age Group | Total | Male | Female | Male | Female |
|-----------|-------|------|--------|------|--------|
| 18-24     | 15.2  | 14.8 | 15.6   | 14.5 | 15.8   |
| 25-34     | 22.1  | 21.5 | 22.7   | 21.2 | 23.0   |
| 35-44     | 28.3  | 27.8 | 28.8   | 27.5 | 29.1   |
| 45-54     | 20.5  | 20.1 | 20.9   | 19.8 | 21.2   |
| 55-64     | 12.7  | 12.3 | 13.1   | 12.0 | 13.3   |
| 65-74     | 5.4   | 5.2  | 5.6    | 5.0  | 5.8    |
| 75+       | 1.8   | 1.7  | 1.9    | 1.6  | 2.0    |

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Office Use Only



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Amend.  
8/12/14  
DC



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 11, 2014

DAWN CLARKE, EXEC. DIR.  
HEALTHY START MOMCARE NETWORK, INC.  
1311 N. PAUL RUSSELL ROAD, SUITE D 204  
TALLAHASSEE, FL 32301

SUBJECT: HEALTHY START MOMCARE NETWORK, INC.  
Ref. Number: N12000006372

We have received your document for HEALTHY START MOMCARE NETWORK, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to file articles of amendment is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

PLEASE RETAIN THE NEW SET OF ARTICLES OF INCORPORATION FOR YOUR RECORDS AS THE ONLY DOCUMENT THAT MAY BE FILED WOULD BE ARTICLES OF AMENDMENT.

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.

Darlene Connell  
Regulatory Specialist II

Letter Number: 814A00014998

RECEIVED  
14 AUG -4 AM  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FL

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: **Healthy Start MomCare Network, Inc.**

DOCUMENT NUMBER: **N12000006372**

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

Please return all correspondence concerning this matter to the following:

**Dawn Clarke**

(Name of Contact Person)

**Healthy Start MomCare Network, Inc.**

(Firm/ Company)

**1311 North Paul Russell Road, Suite D204**

(Address)

**Tallahassee, FL 32301**

(City/ State and Zip Code)

**dclarke1620@gmail.com**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Dawn Clarke**

(Name of Contact Person)

**904 613-0753**

(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 &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>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

Healthy Start MomCare Network, Inc.

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

N12000006372

(Document Number of Corporation (if known))

FILED  
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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)

1311 North Paul Russell Road

Suite D204

Tallahassee, FL 32301

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1311 North Paul Russell Road

Suite D204

Tallahassee, FL

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:

Martha Zimmerman

5907 Berryhill Road

(Florida street address)

New Registered Office Address:

Milton

(City)

, Florida

32570

(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><br>(Check One)   | <u>Title</u>      | <u>Name</u>                               | <u>Address</u>  |
|--|-------------------|---|---|
| 1) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>VP</u>         | <u>Donna Hagen</u>                        | <u>P.O. Box 568</u><br><u>Greenville, FL 3233</u>   |
| 2) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>VP</u>         | <u>Manuel E. Fermin</u>                   | <u>7205 N.W. 19th St</u><br><u>Miami, FL 33126</u>  |
| 3) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove | <u>Tres</u>       | <u>Martha Zimmerman</u>                   | <u>6751 Berryhill St</u><br><u>Milton, FL 32570</u>   |
| 4) <input type="checkbox"/> Change<br><input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove | <u>Tres</u>       | <u>John Tschirhart</u>                    | <u>7147 Congress St</u><br><u>New Port Richey, FL</u><br><u>34653A</u>  |
| 5) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>          </u> | <u>                                  </u> | <u>                                  </u><br><u>                                  </u><br><u>                                  </u> |
| 6) <input type="checkbox"/> Change<br><input type="checkbox"/> Add<br><input type="checkbox"/> Remove            | <u>          </u> | <u>                                  </u> | <u>                                  </u><br><u>                                  </u><br><u>                                  </u> |

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

Article IV - Purpose: Said corporation is organized exclusively for charitable 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 the corresponding section of any future code and other entities. The Healthy Start MomCare Network, Inc. will service as the administrative services organization representing all the Healthy Start Coalitions for the purposes of implementing 409.975 (4) (a) of the Florida Statutes, any related legislated and non-legislated programs and policies, and any other program or purpose permitted by law. The organization is responsible for developing, implementing, managing and overseeing the Healthy Start MomCare Network and any other related programs and services through quality assurance, contract negotiation/ management, provider selection, fiscal management, interagency agreements, reporting and accountability, data management and other activities identified by the organizations Board of Directors. The Healthy Start MomCare Network is responsible for providing services to pregnant women and young children who are on Medicaid, poor and socially disadvantaged with the goal of improving health status and preventing child abuse and domestic violence amount the enrolled families.

Please see attached page.

**ARTICLE VII - NOT FOR PROFIT STATUS:** The Healthy Start MomCare Network is a Not for Profit organization. The corporation shall have all powers now or hereafter granted by law to not for profit corporations under Chapter 617 of the Florida Status, and in addition thereto shall have all powers lawfully necessary or required to carry out its purposes and objectives. The corporation shall have the power and authority to receive, buy, and otherwise acquire by gift, devise, inheritance or otherwise, real and personal property of the kind and character necessary to promote the purposes and objectives of the corporation and hold, use, pledge, mortgage, encumber, sell, lease, invest and reinvest the same, and collect and disburse the income and principle thereof for such purposes, and to borrow money and issue notes and bonds of any kind and character. A recitation in any deed of conveyance made by the corporation that the sale has been authorized by a majority of the Board of Directors shall protect the purchaser of said property.

This corporation is organized under a non-stock basis in compliance with Section 501 (c) (3) of the Internal Revenue Code, or the corresponding section of any future tax code. The corporation shall have no capital stock and pay no dividends. Private property of the subscribers, members, directors and officers shall not be liable for the debts of the corporation.

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 purposes set forth in the Statement of Purpose hereof. The property of this corporation is irrevocably dedicated to the Healthy Start MomCare Network 's 501(c)(3) exempt purpose(s) and no part of the net income or assets of this corporation shall ever inure to the benefit of any director, officer, or member thereof, or to the benefit of any private individual.

No substantial part of the activities of the corporation shall be the carrying on of 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.

**ARTICLE VIII – DISSOLUTION OF ASSETS:** Upon the dissolution of the corporation, assets shall be distributed for one or more exempt purposes within the meaning of section 501(c)(3) of the Internal Revenue Code, or the 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 so disposed of shall be disposed of by a Court of Competent Jurisdiction of the county in which the principal office of the corporation 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

The date of each amendment(s) adoption: July 3, 2014, if other than the date this document was signed.

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 July 8, 2014

Signature Patricia H. McWhirter

(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)

Patricia McWhirter

(Typed or printed name of person signing)

President

(Title of person signing)