

N120000011955

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

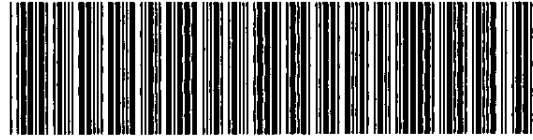
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800243878158

01/28/13--01004--017 **25.00

02/14/13--01008--001 **10.00

Amel
FEB 14 2013
R. WHITE

FILED
13 FEB 14 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2013

FRANCIS PARIS
CAROLYN MISSION INC.
15645 118TH TERR N
JUPITER, FL 33478

SUBJECT: CAROLYN'S MISSION, INC.
Ref. Number: N12000011955

We have received your document for CAROLYN'S MISSION, INC. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$10.00 is due.

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) 245-6820.

Rebekah White
Regulatory Specialist

Letter Number: 513A00002369

RECEIVED
13 FEB 12 AM 10:47
FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 30, 2013

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Rebekah White
Regulatory Specialist

Letter Number: 513A00002369

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAROLYN'S MISSION, INC.
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FRANCIS PARIS
Name of Person
CAROLYN'S MISSION, INC.
Firm/Company
15645 118th TERN
Address
JUPITER, FL 33478
City/State and Zip Code
FMPARDS@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCIS M. PAKOS at (561) 744-2876
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CAROLYN'S MISSION

DOCUMENT NUMBER: N/2000011955

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

Please return all correspondence concerning this matter to the following:

FRANCIS M. PAROS
(Name of Contact Person)

CAROLYN'S MISSION
(Firm/ Company)

15645 118th TER N
(Address)

JUPITER, FL 33478
(City/ State and Zip Code)

FMPAROS@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

FRANCIS PAROS at (561) 744-2876
(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 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

CAROLYN'S MISSION, INC
(Name of Corporation as currently filed with the Florida Dept. of State)

N1200011955
(Document Number of Corporation (if known))

FILED
FEB 14 PM 12:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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: _____

(Florida street address)

New Registered Office Address:

(City)

_____, Florida

(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>

Type of Action
(Check One)

Title

Name

Address

- 1) ☒ Change VS FRANCIS M. PAROS 15645 118TH TER N
☒ Add JUPITER, FL 33478
☐ Remove
- 2) ☒ Change VC CAROLYN HEPBURN 01313508
☒ Add NASSAU, BAHAMAS
☐ Remove
- 3) ☒ Change P MARILEE PAROS 15645 118TH TER N
☐ Add (CORRECT SPELLING) JUPITER, FL 33478
☐ Remove
- 4) ☒ Change V CUREL HEPBURN 265 STERLING AVE.
☒ Add DELMAR BCH, FL 33440
☐ Remove
- 5) ☐ Change _____ _____ _____
☐ Add _____ _____ _____
☐ Remove
- 6) ☐ Change _____ _____ _____
☐ Add _____ _____ _____
☐ Remove

The date of each amendment(s) adoption: JANUARY 20, 2013

Effective date if applicable: JANUARY 20, 2013
(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 2/7/13
Signature Marilee Paros
(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)

MARILEE PAROS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)