

N 13000003124

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

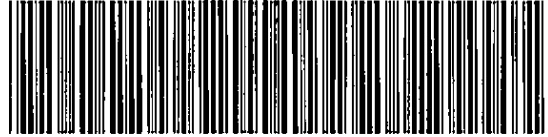
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TALLAHASSEE, FL

Amended
09/17/18
DC



The NonProfit **Resource Center**

"Navigating the Complexities of Non Profit
Organizations & Empowering Them for Success"

Dr. Frederick J. Herzog, PhD, LLC

1201 West Beagle Run Loop

Citrus Hills, FL 34442

Email: fherzog@tampabay.rr.com

Phone: (847) 899-9000 Fax: (352) 419-6399

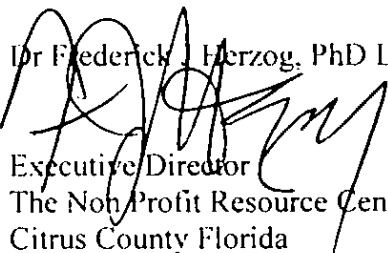
www.TheNonProfitResourceCenter.com

9-9-18

Claretha Golden
Regular Specialist
Florida Dept of State
Div., of Corporations
P.O.Box # 6327
Tallahassee, FL 32314

MS Golden...

Thank you for your assistance with respect to this form. As you directed, I have made the changes and included your letter to me with the corrections. Once again I appreciate your help.

Dr Frederick J. Herzog, PhD LLC

Executive Director
The Non Profit Resource Center
Citrus County Florida



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
18 SEP 13 AM 10:25
SECRETARY
TALLAHASSEE

August 29, 2018

DR. FREDERICK J. HERZOG, PHD
1201 W. BEAGLE RUN LOOP
HERNANDO, FL 34442

SUBJECT: MEMORY ENHANCEMENT CENTER OF AMERICA
CORPORATION
Ref. Number: N13000003124

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

You can check only one (1) type of action per officer/director.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 318A00018021

Articles of Amendment
to
Articles of Incorporation
of

Memory Enhancement Center of America Corporation

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

N13000003124

(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:

n/a

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**)

1201 W. Beagle Run Loop

Hernando, FL 34442

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

1201 W Beagle Run Loop

Hernando, FL 34442

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: n/a

(Florida street address)

New Registered Office Address:

n/a

(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

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TALLAHASSEE, FL

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) <input type="checkbox"/> Change	<u>D</u>	<u>Parmanand Gurnari</u>	<u>4391 N. Pine Valley Loop</u>
<input type="checkbox"/> Add			<u>Lecanto, FL 34461</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	<u>D</u>	<u>Christina Martersson</u>	<u>2950 N. Seneca Pl</u>
<input type="checkbox"/> Add			<u>Crystal River, FL 34429</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	<u>P</u>	<u>Benna Stanley</u>	<u>11493 W. Dixie Shores Dr</u>
<input type="checkbox"/> Add			<u>Crystal River, FL 34429</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	<u>S</u>	<u>Christine Acree</u>	<u>3521 W Daffodil Dr</u>
<input type="checkbox"/> Add			<u>Beverly Hills, FL 34465</u>
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change	<u>D</u>	<u>Marily Campbell</u>	<u>4865 W Gulf To Laake Hwy</u>
<input type="checkbox"/> Add			<u>Lecanto, FL 34461</u>
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change	<u>S</u>	<u>Frederick J Herzog</u>	<u>1201 W Beagle Run Loop</u>
<input checked="" type="checkbox"/> Add			<u>Hernando, FL 34442</u>
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

7) Add-President - Mike Bays 3909 N Lecanato Hwy. Beverly Hills, FL 34465

8) Add- Paresh Desai - Treasurer- 507 NW 9th Avenue , Crystal River, FL 34428

ByLaw-Amendment: Mission and Purpose: Article I, Para 2, Memory Enhancement Center of America Corporation (MECA) will enhance the presence of medical students training in connection with Citrus Memorial Hospital and Citrus County Florida by encouraging medical students to train at the above hospital while residing in a facility provided by Citrus County Florida.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

8-1-18

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

8-1-18

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.

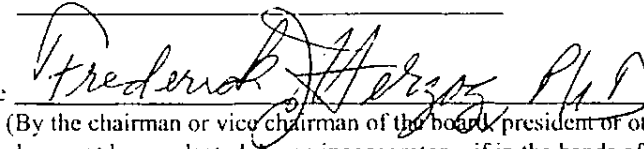
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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.

8-1-18

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)

Dr Frederick J Herzog, PhD

(Typed or printed name of person signing)

Secretary

(Title of person signing)