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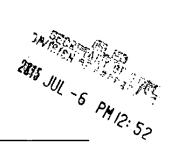
TO: Amendment Section Division of Corporations

NAME OF CORPORATION	Flagler Cares Inc.				
	N15000005449				
The enclosed Articles of Am	endment and fee are subn	nitted for filing.			
Please return all corresponde	ence concerning this matte	r to the following:			
John Incorvaia, Esq.					
 		(Name of Contact Pe			
	•	(Name of Confact Fe	erson)	•	
		(Firm/ Company	<i>(</i>)		
14 Boulder Rock Drive					
		(Address)			
Palm Coast, FL 32137					
	((City/ State and Zip	Code)		
info@yourlawadvisor.com					
E	-mail address: (to be used	for future annual rep	ort notification)	
For further information conc	erning this matter, please of	call:			
John Incorvaia, Esq.		at	386	246-8550	
	(Name of Contact Person)		(Area Code)	(Daytime Telephone Num	iber)
Enclosed is a check for the f	ollowing amount made pay	yable to the Florida I	Department of S	State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	Certifi s Certifi	O Filing Fee leate of Status led Copy tional Copy is used)	

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



Flagler Cares Inc.			
(Name of Corporation	as currenti	y filed with th	e Florida Dept. of State)
M5000	0005	449	
(Docur	ment Number	of Corporation	n (if known)
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes	, this <i>Florida N</i>	Not For Profit Corporation adopts the following
A. <u>If amending name, enter the new name of the</u>	e corporatio	<u>n:</u>	
n/a			The nev
name must be distinguishable and contain the word "Company" or "Co," may not be used in the nam		on" or "incorp	
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	<u>ıble:</u>	n/a	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	- <i>BOX</i>) .	n/a	
D. If amending the registered agent and/or reginew registered agent and/or the new registered.			orida, enter the name of the
Name of New Registered Agent:	n/a		
	** ** ** **	.	(Florida street address)
New Registered Office Address:	:		
	n/a		, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen			accept the obligations of the position.
-	C:-	matura of Nov	Pagistared Agent if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, are	ıd
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 X Remove X Add	<u>V Mik</u>	LDoe e Jones & Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	***********		· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				<u> </u>
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
5) Change				
Add		•	***************************************	
Remove			, , , , , , , , , , , , , , , , , , , 	
6) Change				
Add				
Remove				

(attach additional sheets, if necessary). (Be specific)
New - Article VIII. The organization requires its income for each taxable year to be distributed at such time and in such
manner as not to subject the foundation to tax under Internal Revenue Code (IRC) section 4942. In addition, the
organization prohibits the foundation from: engaging in any act of self-dealing (as defined in IRC section 4941(d));
retaining any excess business holdings (as defined in IRC section 4943(c)); making any investments in such manner as to
subject the foundation to tax under IRC section 4944; and making any taxable expenditures (as defined in IRC
section 4945(d)).
·

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

		June 15, 2015	
The date	of each amendn	nent(s) adoption:	, if other than the
date this d	locument was sig	ned.	
		June 1, 2015	
Effective	date if applicab		
		(no more than 90 days after amendment file date)	
		in this block does not meet the applicable statutory filing requirements, this date will not on the Department of State's records.	be listed as the
Adoption	of Amendment	(S) (CHECK ONE)	
	amendment(s) wa were sufficient fo	as/were adopted by the members and the number of votes cast for the amendment(s) or approval.	
	e are no member oted by the board	s or members entitled to vote on the amendment(s). The amendment(s) was/were of directors.	
	Ju Dated	ine 15, 2015	
	Signature	Xon Richal, KD	
	ha	the chairman or vice chairman of the board, president or other officer-if directors ve not been selected, by an incorporator – if in the hands of a receiver, trustee, or	
	ot	her court appointed fiduciary by that fiduciary)	
		Dr. Stephen Bickel	
		(Typed or printed name of person signing)	
		Chairman of the Board	
		(Title of person signing)	