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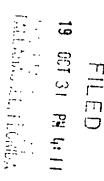
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COVER LETTER

TO: Amendment Section Division of Corporations

Career Options NAME OF CORPORATION:	of Citrus County, Inc.
N18000004848 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
Denise Jenkins	
	(Name of Contact Person)
Career Options of Citrus County, Inc.	
	(Firm/ Company)
4029 W. Alamo Drive	
	(Address)
Beverly Hills, FL 34465	
	(City/ State and Zip Code)
deniserjen@careeropts.org	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Denise Jenkins, President/Owner	352 566-0120
(Name of Contact Pe	
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
□ \$35 Filing Fee	tus Certified Copy (Additional copy is enclosed) \$\begin{align*} \text{S43.75 Filing Fee} \\ \text{Certified Fee} \\ \text{Certified Copy} \\ \text{(Additional Copy is Enclosed)} \end{align*} \$\begin{align*} \text{S52.50 Filing Fee} \\ \text{Certified Copy} \\ \text{(Additional Copy is Enclosed)} \end{align*}

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

of Career Options of Citrus County, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N18000004848 (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 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. N/A B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS C. Enter new mailing address, if applicable: N/A (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: Florida (City) (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: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S.D	Brenda Carter-Davis	1018 Buffalo Creek Road
Add			Lost Creek, WV 26385
X Remove			304-266-6314
2) Change	S.D.	Deborah Cobern	1906 Highway 82 W.
X Add			Prattville, AL 36067
Remove			334-320-1979
3) Change			
Add			-
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Artication (attach additional sheets, if necessary).	(Be specific)
N/A	
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The	e date of each amendment(s) ado	ption:	, if other than the
date	e this document was signed.		
		ст 28, 2019	
Eff	ective date <u>if applicable</u> :	(, , , , , , , , , , , , , , , , , , ,	
		(no more than 90 days after amendment file date)	
	te: If the date inserted in this block ument's effective date on the Department.	does not meet the applicable statutory filing requirement artment of State's records.	s, this date will not be listed as the
Adı	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the	amendment(s)
	There are no members or member adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s).	s) was/were
	Dated 10/28/19		
	Signature	nise Jankins	
		an or vice chairman of the board, president or other office	
		selected, by an incorporator – if in the hands of a receiver pointed fiduciary by that fiduciary)	r, trustee, or
	5 50 <u>2</u> 1		
		Denise Venkins	
		(Typed or printed name of person signing)	
		President/Owner	
		(Title of person signing)	