## N1900000 Cda34

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PH 2:

C. GOLDEN DEC 1 7 2019

## COVER LETTER

midland NAME OF CORPORATION: 1900000 6634 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: pride one RX.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at 754 - 224 - 0914
(Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee ☐ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is Enclosed) Mailing Address Street Address

TO: Amendment Section

**Division of Corporations** 

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment

## Articles of Incorporation

of

MIDLAND	CARES, INC.	2116
(Name of Corporation as curren	tly filed with the F	lorida Dept. of State) 2319 117 15 PH 2:
N19000	006634	
(Document Numb	per of Corporation (if	known)
Pursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	es, this <i>Florida Not</i> .	For Profit Corporation adopts the following
a. If amending name, enter the new name of the corporat	ion:	
		The new
ame must be distinguishable and contain the word "corpora Company" or "Co." may not be used in the name.	tion" or "incorpora	ted" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:		DOKLAND FORK BUDD
Principal office address <u>MUST BE A STREET ADDRESS</u>	) Suite	#103
	OAKIAN	d Pack, FZ 33334
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1421 E.E	pakland Park Blud
	sute \$	
	<del></del>	1 Park, FZ 33334
D. If amending the registered agent and/or registered offi	ce address in Florid	la, enter the name of the
new registered agent and/or the new registered office a	address:	<del></del>
Name of New Registered Agent:		
		(Florida street address)
New Registered Office Address:		r (m ua sireet udaress)
		, Florida
<del></del>	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent:	
hereby accept the appointment as registered agent. I am fa		pt 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.

_	es leaves the corporat emove, and Sally Smith	·	should be noted as John Doe, PL as a Change,
Example:  X Change X Remove X Add	PT John   V Mike SV Sally		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	P	Gregory BELTON	
Add Remove			
2) Change Add	$\overline{h}$	JOEY WYNN	1421 E. OAKLAND BAKBURD Suite 103
Remove 3)Change Add	<u>D</u> _	Kim Saiswick	OPKLAND PARK FL 33334 1421 E. OPKLAND BOK BLUD Suite 103
Remove			OAKION BIK, IZ 33334
4) Change Add	77_	Bill Larock	1421 E. OAKLAND PARK BUD Suite 183
Remove  5) X Change	S- <u>T.</u> D	LAWTENCE BUTKA	OFFICE OFFICE PARK BUCH
Add			Suite 103 OAKland Park, FC 33334
) Change		·	<del></del>
Add Remove			

E. If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	
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The date of each amendment(s) adop date this document was signed.	tion:	if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depar	does not meet the applicable statutory filing requirements, this ditment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop was/were sufficient for approval.	ted by the members and the number of votes cast for the amendn	nent(s)
There are no members or members adopted by the board of directors.	s entitled to vote on the amendment(s). The amendment(s) was/v	vere
Dated	-2018	
	were P. Duth	
have not been s	in or vice chairman of the board, president or other officer-if dire selected, by an incorporator – if in the hands of a receiver, trusted pointed fiduciary by that fiduciary)	
LA	(Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	IRECTOR	<del></del>
	(Title of person signing)	