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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: TURNING POINTE FOR VETERAS INC.
DOCUMENT NUMBER: N21000000954
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Natalie Evans (Name of Contact Person)
(Name of Contact Person)
Turning Pointe For Veterns Inc.
J (Firm/ Company)
2161 NW 29th terr
(Address)
FORT Laudendale Fla 33311 (City/State and Zip Code)
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Notalia Cucans at 954-279-4662 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(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:
♥ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) □ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address Amendment Section Street Address Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

T
F TURNING POINTE FOR VETERANS INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
N21000000956
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The ne
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 <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable:
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)

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:
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.
A Company
Signature of New Registered Agent, if changing

and address of each Of tAttach additional sheets Please note the officer/d P = Prevident: V= Vice	ficer and to if necess irector titl President, = Chief F	(or Direct) (ary) (e by the fit (T= Treas) (inancial C	or being added: rst letter of the offic aurer; S= Secretary Officer. If an officer	ve title: v: D= Director: TR= Tri	director being removed and title, name, ustee; C = Chairman or Clerk; CEO = Chief an one title, list the first letter of each office	
Changes should be noted a change, Mike Jones le Mike Jones, V as Remov	aves the c	orporation	i, Sally Smith is nai	ohn Doe is listed as the ned the V and S. These s	PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change.	
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Sn	nes			
Type of Action (Check One).	<u>Title</u>		<u>Name</u>		Address	
I) Change Add		_	ylunda	Lesane	2101 NW 29th tenal FORT Lawlendair F14 333	¥ (
Remove 2) Change Add		_	<u>Yasmin</u>	Lesaen	210/ NW 29th Lepe FORT Candenware Fly 33	31/
Remove 3) Change Add Remove						
4) Change Add						
Remove 5) Change Add						
Remove 6) Change Add		_				
Remove						
E. <u>If amending or add</u> (attach additional sh				<u>(s) here</u> :		

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The date of each amendment(s) adoption: $9-(0-2)$. if other than the
date this document was signed.
Effective date if applicable: (no more than 90 days after amendment file date)
(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.

Ŷ	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 $9 - 10 - 21$					
	(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)					
	(Typed or printed name of person signing)					