N21000011274

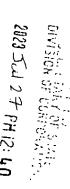
(Requestor's Name)
, ,
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

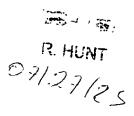
Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

EUREKA AGING WITH DIGNITY NAME OF CORPORATION:	Y CORP.
N21000011274 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing	;.
Please return all correspondence concerning this matter to the following	ing:
LUIS F. JACOBO	
(Name of Cont	tact Person)
EUREKA AGING WITH DIGNITY CORP	
(Firm/ Cor	mpany)
701 PROMENADE DR SUITE 110	
(Addre	ess)
PEMBROKE PINES, FL 33026	
(City/ State and	d Zip Code)
INFO@JACOBOTAX.COM	
E-mail address: (to be used for future annu	ual report notification)
For further information concerning this matter, please call:	
LUIS F. JACOBO	305 556-0044
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Flo	orida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Certificate of Status Certified Cop (Additional centers)	py Certificate of Status
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address 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

EUREKA AGING WITH DIGNITY CORP

Name of Corporation as currently filed with the Flori	da Dept. of State)		
N21000011274			
(Document N	umber of Corporation (if k	nown)	
Pursuant to the provisions of section 617.1006, Florida St amendment(s) to its Articles of Incorporation:	atutes, this Florida Not Fo	or Profit Corporation adopts the follo	owing
A. If amending name, enter the new name of the corp.	oration:		
			e new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	poration" or "incorporate	d" or the abbreviation "Corp." or "l	lnc."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRI</u>	<u> </u>		
C. Enter new mailing address, if applicable:			2023 July & Chip. 60
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			-7,-
			_6 _6
D. If amending the registered agent and/or registered new registered agent and/or the new registered offi		, enter the name of the	ה ה ב
Name of New Registered Agent:			
New Registered Office Address:	(F	lorida street uddress)	
-		Florida	
 -	(City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registed thereby accept the appointment as registered agent. I am		t the obligations of the position.	
	Signature of New Regis	tered 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		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add	VP	MARIO DELGADO	2911 N PINE ISLAND RD APT 112
X Remove			SUNRISE, FL 33322
2) Change Add			
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			· · ·
Remove			
E. If amending or addin (attach additional shee		rticles, enter change(s) here: (Be specific)	
			

•		
		
		
		
		
		
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		<u> </u>
		
		_
		 -
The date of each amendment(s) adop date this document was signed.	otion:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more man 90 days after amenament fite 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 date will not between tof State's records.	e listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop was/were sufficient for approval.	sted by the members and the number of votes cast for the amendment(s)	

	07/21/2023
Dated	80,01
Signatu	
	(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)
	LUIS F. JACOBO
	(Typed or printed name of person signing)