

**W22000002301**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

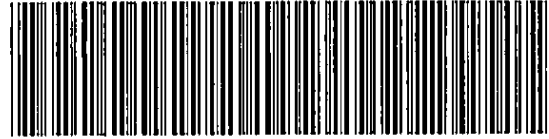
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700408361197

2003 MAY 10 AM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

*ML*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** 4 Sisters Solutions, Inc. \_\_\_\_\_

**DOCUMENT NUMBER:** N22000002301 \_\_\_\_\_

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eva Homer

\_\_\_\_\_  
(Name of Contact Person)

4 Sisters Solutions, Inc.

\_\_\_\_\_  
(Firm/ Company)

3030 Starkey Blvd. Suite 244

\_\_\_\_\_  
(Address)

New Port Richey, Florida, 34655

\_\_\_\_\_  
(City/ State and Zip Code)

eva@4sisters.us

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eva Homer

813

600-7586

at

\_\_\_\_\_  
(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:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|--|---|---|

**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

2023 MAY 10 AM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

Articles of Amendment  
to  
Articles of Incorporation  
of

4 Sisters Solutions, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

N22000002301

(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 The new 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 MUST BE A STREET ADDRESS)

N/A

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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: N / A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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.

N/A

Signature of New Registered Agent, if changing

2022 MAY 10 AM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FL

FILED

**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:

<input checked="" type="checkbox"/> Change	PT	John Doe
<input checked="" type="checkbox"/> Remove	V	Mike Jones
<input checked="" type="checkbox"/> Add	SV	Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	Veronia Otero	3030 Starkey Blvd. Suite 244 New Port Richey, FL 34655
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	COO	MaryEtta Clarkson	3030 Starkey Blvd. Suite 244 New Port Richey, FL 34655
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	D	Tim Nolan	
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	D	Ann Doyle	
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove			

**E. If amending or adding additional Articles, enter change(s) here:**  
*(attach additional sheets, if necessary). (Be specific)*

Amend Article I to state:

1.1 The name of the corporation is: 4 Sisters Solutions, Inc.

1.2 The term for which the Corporation is to exist shall be perpetual.

Amend Article III to state:

3.1 To provide child welfare services to children and parents and engage in services and activities related thereto; and

3.2 To receive from persons, firms, and corporations, by way of gift, donation, devise, or bequest, or, in any other manner, charitable donations and contributions of monies used solely for the advance of the Organization purpose as stated in 3.1.

3.3 In the event of the dissolution of the Corporation all of its assets remaining after payment of costs of such dissolution shall be distributed to organizations exempt from federal income tax under the provisions of 1954 Internal Revenue Code sections 501(c)(3) as they now exist or may hereafter be amended, changed, modified, or supplemented, and none of the assets will be distributed to any member, officer, or director of the Corporation.

The date of each amendment(s) adoption: May 6, 2023, if other than the date this document was signed.

Effective date if applicable: N / A  
(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.
- ☐ 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 May 6, 2023

Signature 

(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)

Eva Horner

(Typed or printed name of person signing)

President and Chief Executive Officer

(Title of person signing)

FILED  
2023 MAY 10 AM 8:42  
SECRETARY OF STATE  
TALLAHASSEE, FL