N22000006828

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

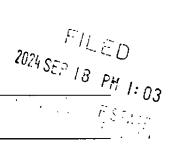
Swim The NAME OF CORPORATION:	nerapy Inc			
N22000006S	28			
DOCUMENT NUMBER:				
The enclosed Articles of Amendment and	fee are submitted for filing.			
Please return all correspondence concerni	ng this matter to the following	:		
Sydney M Layton				
	(Name of Contact	Person)		
Swim Therapy Inc; DBA Creative Swim	Therapy			
	(Firm/ Compa	any)		
10701 S Ocean Drive; Lot 938				
	(Address))	- ·-	
Jensen Beach, FL 34957				
	(City/ State and Z	ip Code)		
creativeswimtherapy@gmail.com				
E-mail address	s: (to be used for future annual	report notific	ation)	
For further information concerning this m	atter, please call:			
SydneyM Layton		772 at	204-3977	
(Name of Co		(Area Co	de) (Daytime Teleph	one Number)
Enclosed is a check for the following amo	ount made payable to the Florid	da Departmen	it of State:	
□ \$35 Filing Fee □\$43.75 Fi Certificat	ling Fee & S43.75 Filing F e of Status Certified Copy (Additional cop enclosed)	C y is C (?	52.50 Filing Fee ertificate of Status ertified Copy Additional Copy is Inclosed)	
Mailing Address		Street Addro	ess	

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 Articles of Incorporation of



Swim Therapy Inc

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

N22000006828		· •
(Document Nu	ımber of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts	the following
A. If amending name, enter the new name of the corpo	orațion:	
N/A		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp.	
B. Enter new principal office address, if applicable:	10701 S Ocean Drive; Lot 938	
(Principal office address MUST BE A STREET ADDRE	(SS) Jensen Beach, FL 34957	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10701 S Ocean Drive; Lot 938	
	Jensen Beach, FL 34957	
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		
N/A		
Name of New Registered Agent:	- · · · · · · · · · · · · · · · · · · ·	
New Registered Office Address:	(Florida street address)	
	, Florida	
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Register	red Agent:	
I hereby accept the appointment as registered agent. I an	n jamutar with and accept the obligations of the positio	n.
	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	PT John Do V Mike Jo SV Sally Si	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
Change Add	<u>D</u>	Sydney M Layton	10701 S Ocean Drive; Lot 938 Jensen Beach, FL 34957 US
Remove 2) Change Add	<u>D</u>	Sydney M Belle	1887 SW Bellevue Ave Port St Lucie, FL 34987 US
X Remove 3) Change Add Remove			
4) Change Add			
Remove 5) Change Add			
Remove 6) Change Add			
(attach additional shee		icles, enter change(s) here: (Be specific)	
N/A			

		
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The date of each amendment(s) adoption: date this document was signed.		if other than the
Effective date if applicable:		
= -6	no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be it of State's records.	e listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by was/were sufficient for approval.	by the members and the number of votes cast for the amendment(s)	

Dated	09/12/2024
Signa	ature
_	(By the chairman or vice chairman of the board, president or other officer-if director have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Sydney M Layton
	(Typed or printed name of person signing)

(Title of person signing)

COVER LETTER

TO: Amendment Section
Division of Corporations

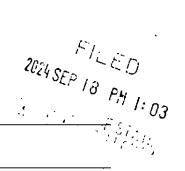
NAME OF CORPORATION	Swim Therapy Inc				
	N22000006828				
DOCUMENT NUMBER:			<u></u>	-	
The enclosed Articles of An	nendment and fee are sub	mitted for filing.			
Please return all correspond	ence concerning this matte	er to the following:			
Sydney M Layton					
		(Name of Contact P	erson)		
Swim Therapy Inc; DBA Co	reative Swim Therapy				
		(Firm/ Compan	у)		
10701 S Ocean Drive; Lot 9	238				
		(Address)			
Jensen Beach, FL 34957					
		(City/ State and Zip	Code)		
creativeswimtherapy@gmai	il.com				
E	E-mail address: (to be used	for future annual re	port notificat	ion)	
For further information con-	cerning this matter, please	call:			
SydneyM Layton		at	772	204-3977	
	(Name of Contact Person		(Area Code	e) (Daytime Tele	phone Number)
Enclosed is a check for the	following amount made pa	ayable to the Florida	Department (of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Cer is Cer (Ad	.50 Filing Fee tificate of Status tified Copy Iditional Copy is closed)	

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

Street Address Amendment Section

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



Swim Therapy Inc

(Name of Corporation as currently filed with the Florida I	Dept. of State)
N22000006828	
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statute amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporat	ion:
N/A	
name must be distinguishable and contain the word "corporal" "Company" or "Co." may not be used in the name.	tion" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	10701 S Ocean Drive; Lot 938
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Jensen Beach, FL 34957
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	10701 S Ocean Drive; Lot 938
	Jensen Beach, FL 34957
D. If amending the registered agent and/or registered offi- new registered agent and/or the new registered office a	
Name of New Registered Agent: N/A	
New Registered Office Address:	(Florida streei address)
<u></u>	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fair	Agent: miliar with and accept the obligations of the position.
Si	ignature 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 A Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
l) Change X Add	<u>D</u>	Sydney M Layton	10701 S Ocean Drive; Lot 938 Jensen Beach, FL 34957 US
Remove			<u></u>
2) Change Add	D	Sydney M Belle	1887 SW Bellevue Ave Port St Lucie, FL 34987 US
X 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	ng additional Arti Is, if necessary).	cles, enter change(s) here: (Be specific)	
IVA	<u> </u>		· · · · · · · · · · · · · · · · · · ·
			· · · · · · · · · · · · · · · · · · ·
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The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable: (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.

D . I	09/12/2024
Dated	
Signatu	re 4
	(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)
	Sydney M Layton
	(Typed or printed name of person signing)