

N93000000195

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

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☐

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(Business Entity Name)

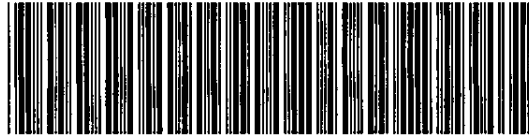
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DIVISION OF CORPORATIONS
14 OCT -8 AM 8:37

C. Lewis
10-17-14

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: HUMAN SERVICES ASSOCIATES INC.

DOCUMENT NUMBER: N93000000195

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

Please return all correspondence concerning this matter to the following:

LEN HARTMAN
(Name of Contact Person)

CBCCFL
(Firm/ Company)

4001 PEELE STREET
(Address)

ORLANDO, FL, 32817
(City/ State and Zip Code)

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

For further information concerning this matter, please call:

LEN HARTMAN at (321) 441-1166
(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 checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is
Enclosed) |
|-----------------------------------------------------|------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|

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

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

Articles of Amendment
to
Articles of Incorporation
of

Human Services Associates, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

N93000000195

(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:

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)

4001 PELEE ST

ORLANDO FL. 32817

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

4001 PELEE ST.

ORLANDO FL. 32817

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:

GERRY GLYNN

4001 PELEE STREET

(Florida street address)

New Registered Office Address:

ORLANDO

(City)

Florida

32817

(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.


Signature of New Registered Agent if changing

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

Type of Action
(Check One)

Title

Name

Address

- 1) ☐ Change TREASURER/ NEAL MCGARRY 1104 MANGO ISLE
☐ Add SECRETARY FT. LAUDERDALE FL 33315
☒ Remove
- 2) ☐ Change PD FRANK FRANCISCO 470 MANOR RD
☐ Add MAITLAND FL 32787
☒ Remove
- 3) ☐ Change CD JOE LARRINAGA 5501 HARBORSIDE DR
☐ Add TAMPA, FL 33615
☒ Remove
- 4) ☐ Change D TOM COPELAND 134A BALD EAGLE
☐ Add GREENVILLE FL. 32331
☒ Remove
- 5) ☐ Change CD GARY ^{W.} JOHNSON 4001 PEELE ST
☒ Add ORLANDO FL 32817
☐ Remove
- 6) ☐ Change D RICHARD
☒ Add RICH MORRISON 4001 PEELE ST
☐ Remove ORLANDO FL 32817

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

The date of each amendment(s) adoption: _____
date this document was signed.

July 17, 2014

FILED
STATE
DIVISION OF CORPORATIONS

Effective date if applicable: _____

July 17, 2014

(no more than 90 days after amendment file date)

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Adoption of Amendment(s)

(CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/3/14

Signature

Gary Johnson

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

W.
GARY JOHNSON

(Typed or printed name of person signing)

CHAIRMAN OF THE BOARD

(Title of person signing)