## N9400004123

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CO	RPORATION: Parent to Pare	nt of St. Lucie County	
DOCUMENT N	NUMBER: <u>N9400004123</u>		
The enclosed Ar	ticles of Amendment and fee are subr	nitted for filing.	
Please return all	correspondence concerning this matte	er to the following:	
_	Lisa	McGlone	
_	(Name of C	Contact Person)	•
_	(Firm/	Company)	
	2582 SW H	inchman Street	
<u>`</u> ••	(A	ddress)	Server of the se
	Dort St. Li	ıcie, FL 34984	,
<del>-</del>		e and Zip Code)	
· · · -		e@comcast.ne for future annual report notific	ation)
For further infor	mation concerning this matter, please		,
Lisa McGlone	)	at ( 772 ) 263-073	<b>14</b>
	Name of Contact Person)	at (772) 263-073 (Area Code & Daytin	me Telephone Number)
Enclosed is a ch	eck for the following amount made pa	ayable to the Florida Departmen	t of State:
<b>☑</b> \$35 Filing Fe	e ☐ \$43.75 Filing Fee & Certificate of Status	□ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 3230	r Circle

## Articles of Amendment to Articles of Incorporation

of	<b>注張 さ</b>
Parent-to-Parent of St. Luc	cie County, Znc
(Name of Corporation as currently filed with	the Florida Dept. of State)
N9400004123	3 C
(Document Number of Corporati	ion (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	The state of the s
A. If amending name, enter the new name of the corporation	<u>n:</u>
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not	
B. Enter new principal office address, if applicable:	2582 SW Hinchman Street
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Port St. Lucie, FL 34984
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2582 SW Hinchman Street
	Port St. Lucie, FL 34984
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
Name of New Registered Agent: Kim	berly Falsey
·	Nativity Terrace
Po	rt St. Lucie , Florida 34984 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am position.  Signature of New	

Page 1 of 3

## ' 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	Brand, Joanne	529 SW Lucerno Dr. Port St. Lucie, FL 34953	□ Add ☑ Remove
<u>D</u> .	Eno, Natalie	2126 SW Ann Arbor Rd Port St. Lucie, FL 34953	
ST	Starling, Bonnie	3322 Sunrise Blvd. Fort Pierce, FL 34982	☐ Add ☑ Remove
	nding or adding additional Articles additional sheets, if necessary). (B		
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<u> </u>		· · · · · · · · · · · · · · · · · · ·	
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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:

<u>Title</u>	· <u>Name</u>	Address	Type of Action
VP	Lane, Jessica	5509 Raintree Trail Ft. Pierce, FL 34982	Add
<b>S</b> .	Falsey, Kimberly	449 SW Nativity Terrace Port St. Lucie, FL 34984	Add
Т	McCabe-Huber, Linda	3020 SW Captiva Ct. Palm City, FL 34990	Add
D	Holley, Vicki	3772 SW Bimini Circle Nort Palm City, FL 34990	h Add
D	Harvey, Lori	230 SW Bridgeport Drive Port St. Lucie, FL 34953	Add
<b>D</b> .	Ponte, Margaret	1466 SW Alligator Street Palm City, FL 34990	Add

·. The date of each amendment	t(s) adoption: July 13, 2010
Effective date <u>if applicable</u> :	July 13, 2010 (date of adoption is required)
Territoria de constante de la	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☑ The amendment(s) was/we was/were sufficient for app	re adopted by the members and the number of votes cast for the amendment(s) roval.
There are no members or adopted by the board of di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
hav	the chairman or vice chairman of the board, president or other officer-if directors re not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Kimberly Falsey (Typed or printed name of person signing)
	Secretary
	(Title of person signing)

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