

N990000004683

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 OCT 12 PM 1:34

Amend  
Name chg  
@ 10/12/10

**COVER LETTER**

**TO: Amendment Section  
Division of Corporations**

**NAME OF CORPORATION:**

Newlife Restorium, Inc

**DOCUMENT NUMBER:**

799000004683

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

Please return all correspondence concerning this matter to the following:

Rose Mary Cash (CEO)

(Name of Contact Person)

Newlife Restorium, Inc.

(Firm/ Company)

4213 E. Grove Street

(Address)

Tampa, Florida 33610

(City/ State and Zip Code)

LPhase6/001@yahoo.com

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

For further information concerning this matter, please call:

Gerry Sanders

(Name of Contact Person)

at (863) 421-2777

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$35 Filing Fee

☐ \$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 Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 14, 2009

ROSE MARY CASH  
LIFELINE PHASE 6  
501 HARTSELL AVE., APT. 22  
LAKELAND, FL 33815

SUBJECT: NEW LIFE RESTORIUM, INC.  
Ref. Number: N99000004683

*10 BE Forwarded*

We have received your document for NEW LIFE RESTORIUM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2008 annual report. The entity must be reinstated before this document can be filed.

The total amount due to reinstate is \$297.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 609A00037974

RECEIVED  
10 OCT 12 AM 9:27  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
2010 APR -8 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 9, 2010

ROSE MARY CASH  
LIFELINE PHASE 6  
501 HARTSELL AVE., APT. 22  
LAKELAND, FL 33815

SUBJECT: NEW LIFE RESTORIUM, INC.  
Ref. Number: N99000004683

We have received your document for NEW LIFE RESTORIUM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file the 2008 annual report. The entity must be reinstated before this document can be filed.

The total amount due to reinstate is \$358.75.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton  
Regulatory Specialist II

Letter Number: 610A00008772

Articles of Amendment  
to

Articles of Incorporation

of

New Life Restorium, Inc.

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

N99000004683

(Document Number of Corporation (if known))

FILED  
SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA  
10 OCT 1 32 PM 1994

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:**

Lifeline Phase 6, Inc.

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)

4243 E. Grove Street  
Tampa, FL  
33610

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

4243 E. Grove Street  
Tampa, FL  
33610

**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:

GARY L. SANDERS

New Registered Office Address:

4243 E. Grove Street

(Florida street address)

Tampa FL 33610

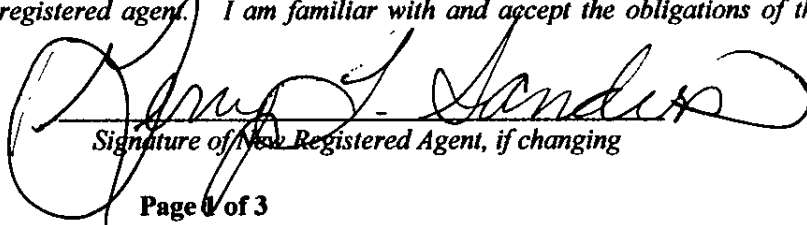
(City)

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.

  
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)

Title	Name	Address	Type of Action
Office B/D	Janet Ontone	210 N.W. 3rd Avenue Mulberry, Florida 33860	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
Office B/D	Charles Martin Miller	1602 Chevy Chase Drive Sunny City Center, Florida 33573	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<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)

Article One: Name: Lifeline Phase  
6, Inc. Article five: Directors  
March 6, 2010 at 10 a.m.  
4213 E. Grove Street, Tampa,  
Florida, names of Board President:  
Rosemary Cash, President:  
1602 Chevy Chase Drive, Sunny  
City Center, Florida 33573  
Sunny Sanders (Executive  
Director) 1117 Shadow Run Drive  
33813

The date of each amendment(s) adoption: \_\_\_\_\_

(date of adoption is required)

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

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 \_\_\_\_\_

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)

(Typed or printed name of person signing)

(Title of person signing)