N9900005653

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
|   |
| (Business Entity Name)                  |
| (Document Number)                       |
| Special Instructions to Filing Officer: |
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#### **COVER LETTER**

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TO: Amendment Section Division of Corporations

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# NAME OF CORPORATION: The 7th Avenue Recovery Center, Inc.

# DOCUMENT NUMBER: N99000005653

Tallahassee, FL 32314

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

Please return all correspondence concerning this matter to the following:

|                                      | Na  | omi Stew     | art   |                               |   |
|--------------------------------------|---|--------------|---|-------------------------------|---|
|                                      | (Name c   | of Contact I | Person)                                       |                               |   |
|                                      | Celebration of L                                | ife Outre    | ach Cen                                       | ter, Inc.                     |   |
|                                      | (Fin  | m/ Compar    | ıy)   |                               |   |
|                                      | . 19283   | NE 25th      | Ave.  | • •                           |   |
|                                      |   | (Address)    |   |                               | n i trans   |
|                                      | Miar  | ni, FL 33    | 180   |                               |   |
|                                      | (City/ St                                       | ate and Zip  | Code)   |                               | an a  |
|                                      | stewart_n                                       | ana@hot      | mail.com                                      | า                             |   |
|                                      | E-mail address: (to be us                       | ed for futu  | re annual i                                   | report notific                | ation)  |
| For further informati                | on concerning this matter, plea                 | se call:     |   |                               |   |
| Naomi Stewart                        |   | at (         | 954   | ) 825-368                     | 3   |
| (Name                                | e of Contact Person)                            |              | (Area C                                       | ode & Daytir                  | ne Telephone Number)  |
| Enclosed is a check f                | for the following amount made                   | payable to   | the Florid                                    | a Departmen                   | t of State:   |
| □\$35 Filing Fee                     | ☑ \$43.75 Filing Fee &<br>Certificate of Status | Certif       | 3.75 Filing<br>ied Copy<br>tional cop<br>sed) | -                             | \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
| Mailing Address<br>Amendment Section |   | •            | Street A                                      | ddress<br>nent Section        | • •   |
| Division of Corporations             |   |              |   | nent Section<br>of Corporatio | ns  |
| P.O. Box 6327                        |   |              | Clifton I                                     | •                             |   |

2661 Executive Center Circle Tallahassee, FL 32301

### 11 MAR -7 AM 9: 35 ALLAHASSEE, FLORIDA **Articles of Amendment** to **Articles of Incorporation** of The 7th Avenue Recovery Center, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N99000005653 (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: Celebration of Life Outreach Center, 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. 19283 NE 25th Ave. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Miami, FL 33180 C. Enter new mailing address, if applicable: P.O. Box 8712 (Mailing address MAY BE A POST OFFICE BOX) Coral Springs, FL 33075 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: Naomi Stewart Name of New Registered Agent: 19283 NE 25th Ave. New Registered Office Address: (Florida street address) Miami , Florida <u>33180</u> (Zip Code) (City) 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

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)

4

1 4

| <u>Title</u> | Name          | Address                     | <b>Type of Action</b> |
|--------------|---------------|-----------------------------|-----------------------|
| <u>P</u>     | Mathis Moore  | 10650 NW 30 PL              | 🗆 Add                 |
|              |               | Bidg 8<br>Sunrise, FL 33322 | Remove                |
| <u>P</u>     | Naomi Stewart | 19283 NE 25th Ave.          | 🗹 Add                 |
|              |               | Miami, FL 33180             |                       |
|              |               |                             | Add Remove            |

#### E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

| <u> </u> |
|----------|

| The date of each amendmen             | t(s) adoption: February 21, 2011                    |
|---------------------------------------|---|
| Effective date <u>if applicable</u> : | (date of adoption is required)<br>February 21, 2011 |
|                                       | (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 February 21, 2011

Signature 0

(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)

Naomi Stewart

(Typed or printed name of person signing)

President

(Title of person signing)

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