

P04000039096

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

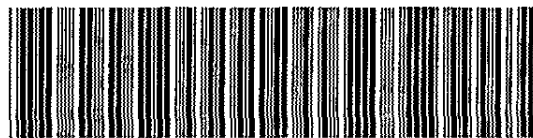
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300031263873

03/29/04--01026--014 **35.00.

FILED
04 MAY -3 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N/C

T BROWN MAY - 4 2004

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Name Change on Articles of Incorporation

DOCUMENT NUMBER: P04000039096

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

Please return all correspondence concerning this matter to the following:

Richard D. Nivison

(Name of Person)

Richard D. Nivison CPA

(Name of Firm/ Company)

3737 Domestic Ave. Suite #2

(Address)

Naples, FL. 34104

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Richard D. Nivison

(Name of Person)

at (239) 434-0990

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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
409 E. Gaines Street
Tallahassee, FL 32399



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 2, 2004

RICHARD D. NIVISON
RICHARD D. NIVISON CPA P.A.
3737 DOMESTIC AVENUE, SUITE 2
NAPLES, FL 34104

SUBJECT: TAKING CARE AGENCY, INC.
Ref. Number: P04000039096

We have received your document for TAKING CARE AGENCY, 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):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6869.

Teresa Brown
Document Specialist

Letter Number: 804A00021771



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

April 26, 2004

RICHARD D. NIVISON
RICHARD D. NIVISON CPA
3737 DOMESTIC AVENUE, SUITE 2
NAPLES, FL 34104

SUBJECT: TAKING CARE AGENCY, INC.
Ref. Number: P04000039096

We have received your document for TAKING CARE AGENCY, 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 capacity of the person signing the document must be typed or printed beneath or opposite the signature.

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed 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.

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) 245-6869.

Teresa Brown
Document Specialist

Letter Number: 304A00027498

Articles of Amendment
to
Articles of Incorporation
of

FILED
04 MAY -3 AM 9:27
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Taking Care Agency, Inc.

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

P04000039096

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

Take Care Agency, Inc.

(must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

N/A

(continued)

The date of each amendment(s) adoption: February 23, 2004

Effective date if applicable: February 23, 2004
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were approved 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.

Signed this 5 day of April, 2004.

Signature

Richard D. Nivison

(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)

Richard D. Nivison

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35