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		MAIL
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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: ______

DOCUMENT NUMBER: P04000101052

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

Please return all correspondence concerning this matter to the following:

CYNTHIA DOREEN SHARPE

Name of Contact Person

PUTNAM PSYCHOTHERAPY, INC.

Firm/ Company

104 OAK TREE LANE

Address

PALATKA, FL 32177

City/ State and Zip Code

cindydsharpe@gmail.com

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

For further information concerning this matter, please call:

 DALLAS R. HEDSTROM, ESQ.
 at (386)
 328-6000

 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:

□ \$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

<u>Mailing Address</u> Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

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

Articles of Amendment to Articles of Incorporation of

PUTNAM PSYCHOTHERAPY, INC.

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

P04000101052

(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:

A. If amending name, enter the new name of the corporation:

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)

104 OAK TREE LANE

The new

PALATKA, FL 32177

C, D.	Enter new mailing address, if apple (Mailing address <u>MAY BE A POST</u> If amending the registered agent an new registered agent and/or the new	<u>OFFICE BOX</u>) Id/or registered office addr		ne of the	2018 OCT 30 PH 3: 27	FILED
	Name of New Registered Agent	CYNTHIA D. SHARPE			_	
		104 OAK TREE LANE				
		(Florida stre	vet address)		-	
	<u>New Registered Office Address:</u>	PALATKA		. Florida		
			(City)	(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)

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:

<u>X</u> Change	<u>PT</u> <u>J</u>	ohn Doe	
X Remove	<u>v</u> <u>N</u>	Mike Jones	
<u>X</u> Add	<u>sv</u> <u>s</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	Address
I) Change	PTS	ALEXANDER B SHARPE III	419 ST. JOHNS AVENUE
Add X Remove			PALATKA. FL 32177
2) Change	P	CYNTHIA DOREEN SHARPE	104 OAK TREE LANE
X Add			PALATKA, FL 32177
Remove			
3) Change			·
Add			<u> </u>
Remove			
4) Change			
Add			<u></u>
Remove			
5) Change			
Add			
Remove			
6) Change			

____ Add

____ Remove

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

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

. F. If an amendment provides for an 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*)

The date of each amendment(s) adoption:	, if other than the				
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)					
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.					

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 9-28-18 Signature Constructor D. Sloch (By a director, president or other officer- if directors or officers have not been

(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)

CYNTHIA D. SHARPE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)