

P04000162169

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

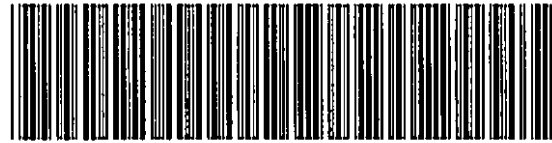
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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*Amended*

07/01/21--01021--009 \*\*35.00

2021 AUG 11 AM 8:36  
OFFICE OF STATE  
CLERK

FILED

AUG 12 2021  
A RAMSEY

\*00789, 0611, 00671

## COVER LETTER

TO: Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** The Chrysalis Center, Inc.

DOCUMENT NUMBER: P04000162169

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

Please return all correspondence concerning this matter to the following:

Eduardo R. Lacasa

Name of Contact Person

Chrysalis Health

Firm/ Company

3800 W. Broward Blvd.

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Address

Ft. lauderdale, Fl. 33312

City/ State and Zip Code

elacasa@chrysalishealth.com

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

For further information concerning this matter, please call:

\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
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

☐ \$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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2021 AUG 11 PM 1:29

July 26, 2021

EDUARDO R. LACASA  
CHRYSLIS HEALTH  
3800 W. BROWARD BLVD  
FT. LAUDERDALE, FL 33312 US

SUBJECT: THE CHRYSLIS CENTER, INC.  
Ref. Number: P04000162169

We have received your document for THE CHRYSLIS CENTER, 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 registered agent must sign accepting the designation.

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) 245-6823.

Annette Ramsey  
OPS

Letter Number: 421A00017386

Articles of Amendment  
to  
Articles of Incorporation  
of

The Chrysalis Center, Inc.

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

P04000162169

(Document Number of Corporation (if known))

FILED  
2021 AUG 11 AM 8:36

CLERK OF STATE  
TALLAHASSEE, FLORIDA

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:**

*The new 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. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

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

(Mailing address **MAY BE A POST OFFICE BOX**)

**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 Angel Junquera

3800 W. Broward Blvd.

(Florida street address)

New Registered Office Address: Ft. Lauderdale, Florida 33312  
(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

**Check if applicable**

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

Remove

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

[illegible]

(if not applicable, indicate N/A)

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June 30, 2021

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

June 30, 2021

Effective date if applicable: \_\_\_\_\_  
(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 incorporators, or board of directors without shareholder action and shareholder action was not required.

☒ 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 <sup>4</sup> \_\_\_\_\_  
(voting group)"

June 30, 2021

Dated \_\_\_\_\_

Signature \_\_\_\_\_

(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)

Eduardo R. Lacasa

\_\_\_\_\_  
(Typed or printed name of person signing)

CAO/General Counsel

\_\_\_\_\_  
(Title of person signing)