

P060000 68937

(Requestor's Name)

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☐ PICK-UP

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(Business Entity Name)

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07 MAR 30 PM 1:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*Received
* Certified
3-30-07*

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Reliable Private Care Inc

DOCUMENT NUMBER: Po6000068937

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

Please return all correspondence concerning this matter to the following:

Norma Hanson

(Name of Contact Person)

Reliable Private Care

(Firm/ Company)

6239 Edgewater Drive Suite N3 North 2

(Address)

Orlando Florida 32810

(City/ State and Zip Code)

For further information concerning this matter, please call:

Norma Hanson

(Name of Contact Person)

at (407) 290-5678

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2007

NORMA HANSON
6239 EDGEWATER DRIVE SUITE N3 NORTH 2
ORLANDO, FL 32810

SUBJECT: RELIABLE PRIVATE CARE, INC.
Ref. Number: P06000068937

We have received your document for RELIABLE PRIVATE CARE, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

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) 245-6916.

Carol Mustain
Document Specialist

Letter Number: 707A00018421

Articles of Amendment
to
Articles of Incorporation
of

RELIABLE PRIVATE CARE, INC.

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

P06000068937

(Document number of corporation (if known))

FILED
07 MAR 30 PM 1:51
SECRETARY 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:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

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

**PLEASE REMOVE HANSON, NORMA Y FROM PRESIDENT TO THE
TITLE OF VICE PRESIDENT. ADD HANSON, HERMAN S TO BE THE
NEW PRESIDENT.**

**PLEASE CHANGE THE ADDRESS FROM 6239 EDGEWATER DR
N3, STE. 2 ORLANDO FL 32810
TO 775 S. KIRKMAN RD. STE. 112 ORLANDO FL. 32811**

(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)

(continued)

The date of each amendment(s) adoption: March 5th 2007

Effective date if applicable: _____
(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.

Signature Norma Hanson
(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)

NORMA HANSON
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: \$35