# P070000 60060

(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



700262385617

07/28/14--01026--007 \*\*43.75

# JUL 28 PM 2: 55

AUG 0 7 2014 C. CARROTHERS

#### **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: HEALING MENTAL CARE, INC DOCUMENT NUMBER: <u>P0</u>7000060060 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SEBNA LEON Name of Contact Person HEALING MENTAL CARE, INC Firm/ Company 5931 NW 173 DRIVE, UNIT 7A MIAMI, FL 33015 City/ State and Zip Code gsruiz@bellsouth.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **GLORIA S RUIZ** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State:

**Mailing Address** 

□ \$35 Filing Fee

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$43.75 Filing Fee &

Certificate of Status

Street Address

■\$43.75 Filing Fee &

Certified Copy (Additional copy is

enclosed)

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

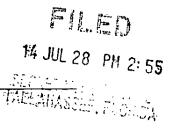
□\$52.50 Filing Fee

Certified Copy

(Additional Copy is enclosed)

Certificate of Status

#### **Articles of Amendment** to **Articles of Incorporation** of



### HEALING MENTAL CARE, INC.

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

mown)	
orida Profit Corporation adopt	s the following amendmen
	The new
o". A professional corporation	ed" or the abbreviation name must contain the
ss in Florida, enter the name o	f the
t address)	
, Florida	
	(Zip Code)
th and accept the obligations of	the position.
rout if alcuraing	
	ith and accept the obligations of

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: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<del></del>	<del>.</del> ———	 
Add			
Remove			
2) Change		<u> </u>	 
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		<del> </del>	 
Add			4444
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		<del>-</del>	 <del></del>
Remove			

Attach add	litional sheets,	additional Art , if necessary).	(Be specific)	· · · · · · · · · · · · · · · · · · ·		
			•••			
					····	
					, <u></u>	
	·					
						,
				· · ·		<del>-</del>
provision	ndment provi ns for implem ot applicable, i	enting the amo	hange, reclass endment if not	ification, or can contained in th	cellation of issu e amendment it	ed shares, self:
						0.11
					· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: 30L   23, 20   4 date this document was signed.	, if other than the
Effective date if applicable: JULY 25, 2014	
(no more than 90 days after amendment file date)	
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 JULY 25, 2014	
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)	
SEBNA LEON	
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	_