

PO 7000122035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

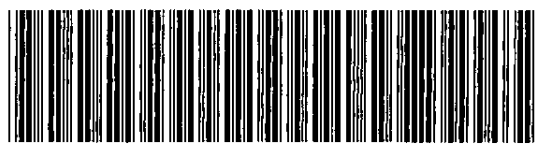
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

Handwritten signature/initials



000112421460

11/26/07--01018--006 **35.00

Handwritten signature/initials

Handwritten date: 29. 2007

Handwritten number: 11

FILED
2007 NOV 26 PM 12:41
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Alice Mae Chappman Health Care Corporation

DOCUMENT NUMBER: P0700012205

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

Please return all correspondence concerning this matter to the following:

Michelle Andrewin

(Name of Contact Person)

Community's Trust Planning and Development

(Firm/ Company)

5401 Lakeshore Drive

(Address)

West Palm Beach, Fla. 33407

(City/ State and Zip Code)

For further information concerning this matter, please call:

Michelle Andrewin

(Name of Contact Person)

at (561) 856-2225

(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

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

Alice Mae Chappman Health Care Corporation

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

FILED

2007 NOV 26 PM 12:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P0700012205

(Document number of corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

Alice Mae Chattman Health Care Corporation

(must contain the word "corporation," "incorporated," or the abbreviation "corp." or "inc." or words of like import in language; "Company" or "Co." may not be used in the name of a not for profit corporation)

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

None

(Attach additional pages if necessary)
(continued)

The date of adoption of the amendment(s) was: November 20, 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) adopted by the members and the number of votes cast for the amendment was sufficient for approval.
- There are no members or members entitled to vote on the amendment. The amendment(s) was (were) adopted by the board of directors.

Signature Alice M. Chattman
(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.)

Alice Mae Chattman
(Typed or printed name of person signing)

President
(Title of person signing)

FILING FEE: \$35