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Amend Mane Mand Mane Mand Mane

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: CAMELOT H	EALTHCARE TRAINI	ING INSTITUTE INC.	
DOCUMENT NUMBER: P090009463	33 .		
The enclosed Articles of Amendment and fee are so	ubmitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
BRYAN DUKE			
	Name of Contact Person	n	
MESSER CAPA	RELLO & SELF		
	Firm/ Company		
2618 CENTENN	• •		
<u> </u>	Address		
TALLAHASSEE,		В	
	City/ State and Zip Cod		
	••• <b>,</b> ••••		
bduke@lawfla.com		•	
E-mail address: (to be u	sed for future annual report	notification)	
For further information concerning this matter, plea	se call:		
BRYAN DUKE	at (850	, 425-5215	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:	
<b>5</b>			
□ \$35 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street	Address	
Amendment Section		Amendment Section	
Division of Corporations	Division of Corporations		
P.O. Box 6327		Building	
Tallahaccae FI 32314	2661 H	vecutive Cepter Circle	

Tallahassee, FL 32301

# Articles of Amendment Articles of Incorporation

# Camelot Healthcare Training Institute Inc.

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

### **DUDUUUUUUUU**

nt(s) to

<u> </u>		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment	
A. If amending name, enter the new name of the corporation:		
NOMORECOMPANY, Inc.	The new	
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation or. A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	2927 Curling Oaks Way	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Orlando, Florida 32820	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same as above	
D. If amending the registered agent and/or registered office addressive new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Not Applicable Not Applicable		
(Florida stree	t address)	
New Registered Office Address:	, Florida	
(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:  Thereby accept the appointment as registered agent. I am familiar with		

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address .
1) Change		NOT APPLICABLE	
Remove			
2)Change			
Add Remove			
3 ) Change Add			
Remove		•	,
4) Change Add	,		
Remove			
5) Change			
Add Remove			
6) Change			
Add Remove			

APPLICABLE	
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rovisions for implementing the amendment if not c (if not applicable, indicate N/A)	ication, or cancellation of issued shares, contained in the amendment itself:
rovisions for implementing the amendment if not c (if not applicable, indicate N/A)	ication, or cancellation of issued shares, contained in the amendment itself:
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rovisions for implementing the amendment if not c (if not applicable, indicate N/A)	ication, or cancellation of issued shares, contained in the amendment itself:
an amendment provides for an exchange, reclassifi rovisions for implementing the amendment if not c (if not applicable, indicate N/A) T APPLICABLE	ication, or cancellation of issued shares, contained in the amendment itself:

The date of each amendment(s)	adoption: February 14, 2012
	ebruary 14, 2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	pproved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voung group)
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder
Dated Feb	mon 13, 2012
~	Ma
Signature	The state of the s
	director, prosident or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court
	inted fiduciary by that fiduciary)
_ uppor	need industrially by that industrially
	Shelley-May A. Abrahams-Green
·	(Typed or printed name of person signing)
	President
	(Title of person signing)