

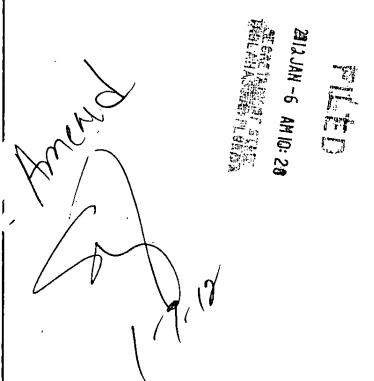
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Addiction Intervention Counseling Service
DOCUMENT NUMBER: P110000 24604
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jeri Silver-Miller Name of Contact Person
Addiction Intervention Counseling Services Inc
14 Ocean Dane Cirde
Halm Coast Fl 32137 City/ State and Zip Code
Jeri Silver Miller @ Gmail - Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jeri Silver Miller at (386) 366-1999 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 \$\ \text{Certificate of Status}\$\$43.75 Filing Fee &\ \text{Certified Copy}\$\$ (Additional copy is enclosed) \$\ \text{Certified Copy}\$\$ (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

to Articles of Incorporation
of O
Addiction Intervention Counseling Services Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P110000 24604
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
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) Palm Coast F1
C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX) 14 Ocan Dune Circle
761m Coast F1 32137
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:
New Registered Office Address: (Florida street address)
, Florida
(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

Articles of Amendment

removed :	ing the Officers and/or Directors, enter the and title, name, and address of each Office ditional sheets, if necessary)		irector being
Title	Name	Address	Type of Action
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	ter Virginia LAtimer	193 N Nomo DR Deitona FI 32725	Add Remove
Sec.	LISA Huser	2075 AVa Cad Port Orange FI 32128	Add Remove
Tros	Teresa Johnson	3660 Grand Alk Deland Fl 3278	Add Remove
	nding or adding additional Articles, enter additional sheets, if necessary). (Be speci		
provis	nmendment provides for an exchange, recions for implementing the amendment if not applicable, indicate N/A)	lassification, or cancellation of iss not contained in the amendment	sued shares, itself:
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removed ar	g the Officers and/or Directors, enter the title, name, and address of each Officers.	ne title and name of each officer/di eer and/or Director being added:	rector being
•	itional sheets, if necessary)		
<u>Title</u>	Name	Address	Type of Action
₹b	Frank Hiller	14 Olban dune Cir Palm Coast Fl 32137	Add Remove
Sec	Jeri Silver Miller	14 Ocan dune Cir Palm Coast Fl 32137	Add Remove
Tres	Frank Miller	14 Ocean dune Cir Palm Coast Fl 32137	Add Remove
	ling or adding additional Articles, enter Iditional sheets, if necessary). (Be speci		
<u>provisio</u>	nendment provides for an exchange, rec ns for implementing the amendment if of applicable, indicate N/A)	lassification, or cancellation of issum of issum of issum of issum of contained in the amendment it	ued shares, tself:
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The date of each amendment(s) adoption:
Effective site if applicable: (date of adoption is required)
(nomore 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_12.21.11
(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)
Jeri Silver miller (Typed or printed name of person signing)
(Title of person signing)