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APR 28 2015 R. WHITE

## **COVER LETTER**

TO: Amendment Section Division of Corporation			
NAME OF CORPOR	DIADAG	<u>c Adult Dau</u> 1031436 (	y Training Inc
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
		Name of Contact Person  Ar Adult  Firm/ Company  You Way  Address  Ti 3314  City/ State and Zip Cod  Saur @ Zwail	
		sed for future annual report	
For further information	n concerning this matter, pleas	20-	304-6120
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Box 6327 Inhassee, FL 32314	Ameno Divisio Clifton	Address  Iment Section  on of Corporations  Building  Executive Center Circle

Tallahassee, FL 32301

## **Articles of Amendment**

to
Articles of Incorporation

Lone Star Adult Day Training Inc
(Name of Corporation as currently filed with the florida Dept. of State) 153 AFR 22 Fig. 3: 17
P120000 31436 SECAL MATERIAL STATE
(Document Number of Corporation (if known)  SLEAR TACK SEE, FLORIDA
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:
The new
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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
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 Jorg Dominols
2BIS SW WST
(Florida street address)
New Registered Office Address: (City), Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agents.  I hereby accept the appointment as registered agent I am familiar with and accept the obligations of the position.
- I Dam
Signatura of flow 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.

X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	Ily Smith	
Type of Action (Check One)  1) Change Add Remove	Title	Yitzlak Rivero	Address 61 SW 31 Rd War FT, 33129
2) Change Add	P	Torge Domingues	2815 DW 657 Mahi, FT, 33135
Remove 3) Change Add			
Add			
7) Change Add		<u>.</u>	
Change Add Remove			

tach additional sheets, if necessary).	ticles, enter cl . (Be specific	2)			
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n amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclass endment if not	ification, or c contained in	ancellation of the amendme	issued shares ent itself:	<b>:</b>
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	<b>10.</b> 10. 10. 10. 10. 10. 10. 10. 10. 10. 10.				
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The date of each amendment(s) adoption: , if other than the date this document was signed. 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 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 (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 X (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) (Typed or printed name of person signing)

(Title of person signing)