## 

| (Requestor's Name)      |                    |             |  |
|-------------------------|--------------------|-------------|--|
| (Address)               |                    |             |  |
| (Ad                     | ldress)            |             |  |
| (Cit                    | ty/State/Zip/Phon  | e #)        |  |
| PICK-UP                 | ☐ WAIT             | MAIL        |  |
| (Bu                     | isiness Entity Nai | me)         |  |
| (Do                     | ocument Number     | )           |  |
| Certified Copies        | _ Certificate      | s of Status |  |
| Special Instructions to | Filing Officer:    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |
|                         |                    |             |  |





04/16/15--01003--008 \*\*35.00



## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: MID KEYS COUNSELING, INC.             |   |  |  |  |
|--|---|--|--|--|
| DOCUMENT NUMBER: P13000021654                              |   |  |  |  |
| The enclosed Articles of Amendment and fee are submitted   | ed for filing.  |  |  |  |
| Please return all correspondence concerning this matter to | o the following:  |  |  |  |
|  | ame of Contact Person   |  |  |  |
|  | Firm/ Company   |  |  |  |
|  | Address HWY, #224   |  |  |  |
| MARATHO ル FL 33050 City/ State and Zip Code                |   |  |  |  |
| <u>Mid Keys counseling</u> E-mail address: (to be used for | ng Egmail. com or fixure annual report notification)  |  |  |  |
| For further information concerning this matter, please cal | 1:  |  |  |  |
| VICHOLAS TOMAN   | at ( 305 ) 395-243 o  Area Code & Daytime Telephone Number  |  |  |  |
| Name of Contact Person                                     | Area Code & Daytime Telephone Number  |  |  |  |
| Enclosed is a check for the following amount made payab    | ole to the Florida Department of State:   |  |  |  |
| Certificate of Status                                      | \$43.75 Filing Fee & Status Certified Copy Additional copy is enclosed)  \$2.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |  |  |  |
| Mailing Address  | Street Address  |  |  |  |

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

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

## **Articles of Amendment**

to
Articles of Incorporation

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

| MID KEYS COUNSEL  | 기시대 , luc.  | 15 APR 16  | AM 10: 36                  |
|---|---|--|----------------------------|
| (Name of Corporation as currently f   | filed with the Florida Dept. of State)            |  | •                          |
|   | P13000021654                                      |  |                            |
| (Document Number o  | f Corporation (if known)                          |  |                            |
| Pursuant to the provisions of section 607.1006, Florid its Articles of Incorporation:   | la Statutes, this <i>Florida Profit Corporati</i> | ion adopts the following                         | g amendment(s) to          |
| A. If amending name, enter the new name of the c  | orporation:                                       |  |                            |
| name must be distinguishable and contain the wo.  | THERAPIST, INC                                    | •  | _The new                   |
| name must be distinguishable and contain the wo. "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the | p," "Inc," or "Co". A professional co             | corporated" or the all<br>orporation name must c | bbreviation<br>contain the |
| B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD)   |   |  |                            |
|   |   |  | •                          |
|   |   | · · · · · · · · · · · · · · · · · · ·            | •                          |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO   | <u> </u>  |  |                            |
|   |   |  |                            |
|   |   |  |                            |
| D. If amending the registered agent and/or registe  | red office address in Florida, enter the          | e name of the                                    |                            |
| new registered agent and/or the new registered  |   |  |                            |
| Name of New Registered Agent  | N/A   |  |                            |
|   |   |  |                            |
|   | (Florida street address)                          |  |                            |
| New Registered Office Address:  | , Flo   | orida(Zip Code)                                  |                            |
|   | (Cay)   | (Zip Code)                                       |                            |
| New Registered Agent's Signature, if changing Re  | gistered Agent:                                   |  |                            |
| I hereby accept the appointment as registered agent.  |   | ations of the position.                          |                            |
|   | ALA   |  |                            |
| Signature of N  | ew 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 | 1          |     |                 |
|-------------------------------|--------------|----------|------------|-----|-----------------|
| X Remove                      | <u>v</u>     | Mike Jon | <u>ies</u> |     |                 |
| X Add                         | <u>sv</u>    | Sally Sm | <u>ith</u> |     |                 |
| Type of Action<br>(Check One) | <u>Title</u> |          | Name       |     | <u>Addres</u> s |
| 1) Change                     |              |          |            |     |                 |
| Add Remove                    |              |          |            | N/A |                 |
| 2) Change                     |              |          |            |     |                 |
| Add                           |              |          |            |     |                 |
| Remove                        |              |          |            |     |                 |
| 3) Change                     |              |          |            |     |                 |
| Add                           |              |          |            |     |                 |
| Remove                        |              |          |            |     |                 |
| 4) Change                     |              |          |            |     |                 |
| Add                           |              |          |            |     |                 |
| Remove                        |              |          |            |     |                 |
| 5) Change                     |              |          |            |     |                 |
| Add                           |              |          |            |     |                 |
| Remove                        |              |          |            |     |                 |
| 6) Change                     |              | <u> </u> |            |     |                 |
| Add                           |              |          |            |     |                 |
| Remove                        |              |          |            |     |                 |

| f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A) | f amending or adding additional Articles, enter change(s) here:  Attach additional sheets, if necessary). (Be specific) |  |
|---|---|--|
| f an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A) |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  | N/A   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  | ·   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  | · · · · · · · · · · · · · · · · · · ·   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  |   |  |
| N/A   | provisions for implementing the amendment if not contained in the amendment itself:                                     |  |
| N/A   |   |  |
|   | N/A   |  |
|   |   |  |
|   |   |  |
|   |   |  |
|   |   |  |

| The date of each amendment(s) adoption:   | 4/13/15<br>4/13/15   | FILE CONTROL OF SECRETARY OF STARS  DIVISION OF CORRODALIF other than the |
|---|--|---|
| date this document was signed.  |  |   |
| Effective date if applicable:   | 4/13/15  | 15 APR 16 AM 10: 36   |
|   | (no more than 90 days after amend                            | ment file date)   |
| Adoption of Amendment(s) (CH)   | ECK ONE)   |   |
| The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a |  | ast for the amendment(s)  |
| The amendment(s) was/were approved by the must be separately provided for each voting   |  |   |
| "The number of votes cast for the amend   | dment(s) was/were sufficient for app                         | roval   |
| by(voti   | <del></del>  | 37<br>  |
| (voti   | ng group)  |   |
| The amendment(s) was/were adopted by the baction was not required.                      | poard of directors without shareholde                        | r action and shareholder  |
| The amendment(s) was/were adopted by the in action was not required.                    | ncorporators without shareholder act                         | ion and shareholder   |
| Dated4//3//   | 5  |   |
| Signature   | Tour our   | a andre   |
|   | dent or other officer – if directors or                      |   |
| appointed fiduciary   | porator — if in the hands of a receive<br>by that fiduciary) | r, trustee, or other court  |
| NIC   | HOLAS TOMAN  |   |
|   | (Typed or printed name of pers                               | on signing)   |
|   | WHER PRESIDENT   |   |
|   | (Title of person signing                                     | i)  |

. . . .