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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: LAKES OF THE	MEADOW RECOVERY,	NC.	
DOCUMENT NUMBER	R: P14000050836			
	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ndence concerning this ma	tter to the following:		
М	ichael J. Schlesinger, Esq.			
_		Name of Contact Perso	n	
SC	CHLESINGER & ASSOCI	ATES, P.A.		
	· 	Firm/ Company		
800 BRICKELL AVENUE, SUITE 1400				S.
		Address	-	•
М	IAMI, FL 33131			
_		City/ State and Zip Cod	e	
MJS@M	IJSJD.COM ; ESERVICE(@MJSJD.COM		
		sed for future annual report	notification)	
For further information co	oncerning this matter, pleas	se call:		
MICHAEL SCHLESINGER		at (305	373-8993) de & Daytime Telephone Number	
Name of C	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for th	ne following amount made	payable to the Florida Depa	artment of State:	,
\$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)	
Amend Divisio P.O. Bo	g Address ment Section n of Corporations ox 6327 assee, FL 32314	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

LAKES OF THE MEADOW RECOVERY, INC.

(Name of Corporate	tion as currently filed with the Florida Dept. of State)
1000050836	
(Doeu	ument Number of Corporation (if known)
(15004	and trained of corporation (a known)
suant to the provisions of section 607.1006, Florid Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following amendmen
If amending name, enter the new name of the c	corporation:
e must be distinguishable and contain the wo rp.," "Inc.," or Co.," or the designation "Cor, d "chartered," "professional association," or the	The new ord "corporation," "company," or "incorporated" or the abbreviation pp." "Inc," or "Co". A professional corporation name must contain the new abbreviation "P.A."
Enter new principal office address, if applicab ncipal office address <u>MUST BE A STREET AD</u>	
Enter new mailing address, if applicable:	•
Mailing address <u>MAY BE A POST OFFICE B</u>	<u>ox</u>)
	8.
If amending the registered agent and/or registe	ered office address in Florida, enter the name of the
new registered agent and/or the new registered	d office address:
Name of New Registered Agent	
Name of New Registered Agent	
Name of New Regimered Agent	ered office address in Florida, enter the name of the d office address:
Name of New Registered Agent	(Florida street address)
New Registered Office Address:	(Florida street address), Florida (City) (Zip Code)

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 Change	<u>PT</u>	John De	<u>ve</u>			
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>		Name	Address		
1) Change	D		ROBERT G. HARDEN	9260 SW 142 ST		
Add				MIAMI, FL 33176		
X Remove						
2) Change		_				
Add						
Remove						
3) Change						
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change						
Add				 .		
Remove						
6) Change						
Add						
Remove						

касп ааатопаг эпесы, у пессыагуу.	icles, enter change(s) here (Be specific)		
<u> </u>			
	,		
		 	
			<u></u>
		····	
C	<u>hange, reclassification, or</u> endment if not contained i	cancellation of issue in the amendment its	<u>d shares,</u> <u>elf:</u>
provisions for implementing the ame			
f an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)			
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provisions for implementing the ame	TO THE TOTAL PROPERTY OF THE PARTY OF THE PA		
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f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)			

The date of each amendment(s) adoption:	than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	d as the
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 4/18/16	
Signature Lana Harden	
(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)	
IRMA HARDEN	
(Typed or printed name of person signing)	
PERSONAL REPRESENTATIVE OF ROBERT G. HARDEN	
(Title of person signing)	