P14000094951

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000168620 3)))

H16000168620 3ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.
Account Number : I20000000019
Phone : (305)552-5973
Fax Number : (305)675-5944

FILED
16 JUL 13 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

COR AMND/RESTATE/CORRECT OR O/D RESIGN
LIFE WELL BEHAVIORAL HEALTH CENTER, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	$35.00

RECEIVED
16 JUL 13 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu Corporate Filing Menu Help

7/14

H16000168620

Articles of Amendment
to
Articles of Incorporation
of

Life Well Behavioral Health Center, Inc.

Florida Document Number: P14000094951

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

Delete
REMOVE: Alejando Santos (VP)

FILED
JUL 13 2016
DIVISION OF CORPORATIONS
FLORIDA DEPARTMENT OF STATE

These articles of amendment were adopted on 7/12/2016.

The corporation has only one group of voting stock. This amendment was approved by the shareholders and the number of votes cast for amendment was sufficient for approval.

Signature

Janet Gonzalez (President)

Printed Name and Title

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