## P15000055829

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Senior Care Owne	rship 2, Inc.	
DOCUMENT NUME	BER: P15000055829		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Mark B. Bouldin		
		Name of Contact Person	1
	Senior Care Ownership 2, Inc	c.	
		Firm/ Company	
	8380 Bay Pines Blvd., 3rd Fl	loor	
		Address	
-	St. Petersburg, FL 33709		
•		City/ State and Zip Cod	e
msmi	th@kronoscapital.com		
<del>- ·</del>	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Mark C. Bouldin		at ( <sup>727</sup>	592-8889
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division Clifton	Address Iment Section on of Corporations Building Executive Center Circle
1 2111	311055CC, FL JZJ14	∠001 E	ACCULIVE CEILLEI CITCIE

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Senior Care Ownership 2, Inc.

(Name of Corpora	tion as currently	filed with the Florida	Dept. of State)	
P15000055829				
(Docu	ument Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	da Statutes, this F	lorida Profit Corporat	ion adopts the followin	g amendment(s) to
A. If amending name, enter the new name of the	corporation:			
				_The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Col word "chartered," "professional association," or th	rp," "Inc," or "C	lo". A professional co		
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL				
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE B</u>	( <u>OX</u> )			
D. If amending the registered agent and/or regist		ess in Florida, enter th	e name of the	
new registered agent and/or the new registere	d office address:			=
Name of New Registered Agent				_
				_
	(Florida stre	et address)		
New Registered Office Address:			, Florida	
	(	City)	(Zip	Code)
New Registered Agent's Signature, if changing R I hereby accept the appointment as registered agent		ith and accept the oblig	gations of the position.	
Sig	gnature of New Re	gistered Agent, if chan	ging	<del>-</del>

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 <math>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> <u>Jo</u>	hn Doe	
X Remove	<u>v</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	PT	Mark C. Bouldin	8380 Bay Pines Blvd., 3rd Floor
Add			St. Petersburg, FL 33709
Remove			
2) Change	S	Mary E. Smith	8380 Bay Pines Blvd., 3rd Floor
X Add			St. Petersburg, FL 33709
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
Kemove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
•	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
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provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
orovisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment(s) a date this document was signed.	adoption:	, if other than the
uate this document was signed.	•	
Effective date <u>if applicable</u> :	(	
	(no more than 90 days after amendment file da	te)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were act by the shareholders was/were	dopted by the shareholders. The number of votes cast for the assufficient for approval.	mendment(s)
	oproved by the shareholders through voting groups. The follow or each voting group entitled to vote separately on the amendm	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and	i shareholder
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and sha	reholder
July 8, 20 Dated	015	
Signature	a y	
(By a select	director, president or other officer – if directors or officers haved, by an incorporator – if in the hands of a receiver, trustee, on the fiduciary by that fiduciary)	
	Mark C. Bouldin	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	