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COVER LETTER

TO: Amendment Section Division of Corpor			
NAME OF CORPORA	1717	Supportive Senices -	Pnc.
The enclosed Articles of	**************************************	abmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
_	Yvonne	Name of Contact Person	
_	467584	Firm/Company 155M Place Rd	
Ocala, FC 34473 City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Y WNN P	R Hall Contact Person	at (8/3) 887-5/9 Area Code & Daytime Telephone	SZ e Number
Enclosed is a check for the following amount made payable to the Florida Department of State:			
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee & Certificate of Status (Additional Copy is enclosed)	
<u>Maili</u>	ng 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 of

Hall Supportive Sense	ies Inc.
(Name of Corporation as currently f	iled with the Florida Dept. of State)
1 60000 22586	
(Document Number of C	orporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fla</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporation name must contain the
word chartered, projessional association, or the appreviation 1	
B. Enter new principal office address, if applicable:	<u> </u>
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	92 25
C. Enter new mailing address, if applicable:	2 2
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2 · · · ·
	<u>Et.</u>
D. If amounting the undetend occur and/or undetend office address	o in Elevido, autor the name of the
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Fiorida, enter the table of the
Name of New Registered Agent V/1)N N.P.	Ha 11
Name of New Registered Agent	IN-th PI - OI
46 / SW (Florida street	address)
Da la	31/1/72
New Registered Office Address: UCAUC	, Florida J74 J
, ,	(
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.
Umo Rolla	el
Signature of New Reg	istered 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 <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.

X Change	PT John D	loe	
X Remove	V Mike J	<u>lones</u>	
_X Add	SV Sally S	<u>Smith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change	1	Bynn S Hall	4675 SWISSTAPLRO
Add		•	Oala FL34473
Remove	Λ _		
2) X Change	Pat	Ywnne Rtall	46755W155TAPLRO
Add			Ocala FC 34473
Remove	1/	Villand Die 11	4675 Sw/53120
3) Change	/	Yvinne Rhall	Ocaley FE34473
AddRemove			
	1/	D 10111-11	\$200c = 1740
4) Change	<u> </u>	Reginald LWright	0 2000 21 7/19
X_ Add			Conjust 54480
Remove	_	1 3 5 0	111
5) Change	5_	Acicia DPrice	4677 SW40thPL
Add			Ocala, KC 34474
Remove			
6) Change		1	
Add			
Remove			

• • • • • • • • • • • • • • • • • • • •	(Be specific)
NA	
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If an amendment provides for an exclusions for implementing the ame	nange, reclassification, or cancellation of issued shares,
cif not applicable indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
cif not applicable indicate N/A)	indment if not contained in the amendment itself:
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis
cif not applicable indicate N/A)	indment if not contained in the amendment itself:
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: // // // // // // // // // // // // //	est transmission and transmission are transmission and transmission are
(no more than 20 days after amenanem file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"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 shaction was not required.	nareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and sharehaction was not required.	older
Dated March 22, 2016 Signature WWW R Flower	
Signature MMR Flower	
(By a director, president or other officer – if directors or officers have reselected, by an incorporator – if in the hands of a receiver, trustee, or o	
appointed fiduciary by that fiduciary)	ther court
Tronne R Hall	
(Typed or printed name of person signing)	
Gresident	****
(Title of person signing)	