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MAY 2 1 2018

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	PRESTIGE BEHA	AVIORAL & MENTAL HI	EALTH SERVICES, INC.	
DOCUMENT NUMBER:	P18000012924			
The enclosed Articles of Amena	<i>lment</i> and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following:		
		JORGE DE LA PAZ		
		Name of Contact Perso	n	
	PRESTIGE B	EHAVIORAL & MENTAI	L HEALTH SERVICES	
		Firm/ Company	· · ·	
		10505 SW 146TH AVE		
		Address		
		MIAMI FL 33186		
		City/ State and Zip Cod	e	
	jorge@	prestigebmhs.com		
E-m:		sed for future annual report	notification)	
For further information concerni JORGE DE L		se call: 786 at (	306-8705	
Name of Contact	Person		de & Daytime Telephone Number	
Enclosed is a check for the follo	wing amount made	payable to the Florida Depa	artment of State:	
	3.75 Filing Fee & rtificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address  Amendment Section  Division of Corporations		Street Address Amendment Section Division of Corporations		
P.O. Box 6327	7	Clifton Building		
Tallahassee, F	L 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

## FILED

## Articles of Amendment to Articles of Incorporation

18 MAY 18 PM 1: 25

of SECRETARY GENERALE PRESTIGE BEHAVIORAL & MENTAL HEALTH SERVICES INCHASCLE FLORIDA

(Name of Cor	poration as currently	y filed with the Florida Dept. of State)
	P1800001	2924
(	Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of	the corporation:	
N/A		The new
	"Corp." "Inc," or "(	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if app	licable:	
(Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFIC</u>		
D. If amending the registered agent and/or r new registered agent and/or the new regis		
Name of New Registered Agent	N/A	
ivane of New Neglistered light		<del></del>
	(Florida stre	and district S
	(Ftortaa sire	et uaaress)
New Registered Office Address:		, Florida
	· ·	(City) (Zip Code)
N . D. Ca. La		
New Registered Agent's Signature, if changir I hereby accept the appointment as registered a		
and the second s	A	and accept the congunities of the position.
	Signature of New Re	egistered 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 D	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	one <u>s</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	V		GIPSY DE LA PAZ	10505 SW 146TH AVE
X Add				MIAMI FL
Remove				33186
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				<del></del>
4) Change				
Add				***************************************
Remove				<del></del>
5) Change				
Add				<del></del>
Remove				
6) Change				
Add		<del></del>		<del></del>
Remove				

,	icles, enter change(s) here: (Be specific)
//A	
	<del></del>
	<del></del>
	<u> </u>
-	
If an amendment provides for an exchi	ange, reclassification, or cancellation of issued shares,
	ndment if not contained in the amendment itself:
provisions for implementing the amer	doment is not contained in the amendment tisen.
provisions for implementing the amer (if not applicable, indicate N/A)	adment is not contained in the amendment tisen.
provisions for implementing the amer (if not applicable, indicate N/A)	adment in the amendment teen.
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provisions for implementing the amer	Adment in not contained in the amendment scen.
provisions for implementing the amer (if not applicable, indicate N/A)	Action in the contained in the amendment agent.
provisions for implementing the amer (if not applicable, indicate N/A)	Action in the Committee in the amendation (Section 1)

• •	05/14/2018	
The date of each amendment(s) addate this document was signed.	loption:	if other than the
N/ Effective date <u>if applicable</u> :	A	
Enective date <u>ir applicable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements partment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ame flicient for approval,	ndment(s)
	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and sh	nareholder
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareh	older
05/14/20 Dated	18	
Dated		
Signature	How	
(By a d selected	rector, desident or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or or ed fiduciary by that fiduciary)	
	JORGE DE LA PAZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	