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FLORIDA DEPARTMENT OF STATE **Division of Corporations**

September 19, 2018

JOSEPH CIAVARELLA SR 12260 SW 53RD STREET STE 611 COOPER CITY, FL 33330

SUBJECT: CHIVCO INC. Ref. Number: P18000025254

We have received your document for CHIVCO INC, and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document submitted cannot be filed to make changes in the officers/directors of a corporation. Enclosed is the correct form for making these changes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 118A00019583

COVER LETTER

TO: Amendment Section

Division of Corporations CHIVCO TNC. NAME OF CORPORATION: <u>P18000025254</u> DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joseph. Ciavarella
Name of Contact Person CHIVCO TNC.

Firm/ Company

Firm/ Company

Suite 611.

Address

Cooper City FL 33330.

(ity/ State and Zip Code Joe @ spectrum life Care.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Joseph Ciavarella at 954 4995794

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: 🔀 \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

CHIVCO THC

(Name of Corporation as currently filed with the Florida Dept. of State)
P18000075Z54.
(Document Number of Corporation (if known)

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

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 "C word "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the 2.4."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	17260 SW 53rd ST. Swite 611. Cooper City, FL 33330.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	17760 SW 5318 ST. Suite 611 Cooper City, \$L 33330
D. If amending the registered agent and/or registered office address: Name of New Registered Agent 12260 SW 55 (Florida street) 1260 SW 53'0 ST New Registered Office Address: 1260 SW 53'0 ST New Registered Office Address SW	in varelly Sr 3rd St. Suite GIL, Cooper City, Flass

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name Name	Address
1) Change	<u>P</u>	111911 NEW CHOVARING E, SE	9440 S.W. 515t CT. (ooper City, FL 33328
Add			Looper City, FL 33328
_X Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			-· ·· ·
Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding additional Articles, enter change(Attach additional sheets, if necessary).—(Be specific)	
	
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The date of each amendment(s) adoption:	9/14/2018	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	09/14/2018.	
((no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, ate's records.	this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
☐ The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	archolders. The number of votes east for the amend proval.	lment(s)
	hareholders through voting groups. The following , roup entitled to vote separately on the amendment()	
"The number of votes cast for the amendr	ment(s) was/were sufficient for approval	
by	g group)	
(votin	g group)	
☐ The amendment(s) was/were adopted by the boaction was not required.	ard of directors without shareholder action and sha	reholder
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Dated 912	412018	
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Signature	alle Le:	
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appointed fiduciary b		er com:
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(T ₂	_	
	President. (Title of person signing)	_
	(Title of person signing)	