

P180000C 60199

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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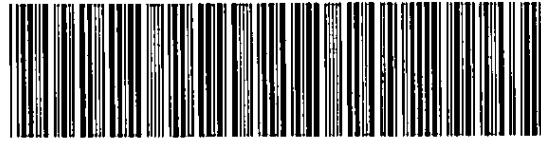
(Business Entity Name)

(Document Number)

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J DENNIS  
AUG 11 2021

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Sunset Community Mental Health, Inc.  
DOCUMENT NUMBER: PT80000060199

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ada Linares  
Name of Contact Person

Firm/ Company  
9415 SW 72 St Suite 151  
Address  
Miami FL 33173  
City/ State and Zip Code

Sunsetcommunitymentalhealth@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ada Linares at (305) 972-0375  
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

**Mailing Address**  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Sunset Community Mental Health Inc  
(Name of Corporation as currently filed with the Florida Dept. of State)

P18 00060199

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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                      PT      John Doe  
  
X Remove                      V      Mike Jones  
  
X Add                          SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>Change</u> ____ Add <u>X</u> Remove	<u>P</u>	<u>Gladys Linares</u>	<u>4840 SW 90th</u> <u>Miami FL 33165</u>
2) <u>Change</u> <u>X</u> Add ____ Remove	<u>P</u>	<u>Alan Linares</u>	<u>9885 SW 96th St</u> <u>Miami FL 33165</u>
3) <u>Change</u> ____ Add ____ Remove	_____	_____	_____ _____ _____
4) <u>Change</u> ____ Add ____ Remove	_____	_____	_____ _____ _____
5) <u>Change</u> ____ Add ____ Remove	_____	_____	_____ _____ _____
6) <u>Change</u> ____ Add ____ Remove	_____	_____	_____ _____ _____

**E. If amending or adding additional Articles, enter change(s) here:**  
(Attach additional sheets, if necessary). (Be specific)

N/A

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,**  
**provisions for implementing the amendment if not contained in the amendment itself:**  
(if not applicable, indicate N/A)

N/A

The date of each amendment(s) adoption: 6/24/21 if other than the date this document was signed.

Effective date if applicable: 6/24/21  
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by Ada Linares  
(voting group)

Dated 6/24/2021

Signature

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Ada Linares

(Typed or printed name of person signing)

President

(Title of person signing)