# P190000077776

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#### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: \_\_\_\_\_

DOCUMENT NUMBER: P19000007776

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

Please return all correspondence concerning this matter to the following:

Alina Beaufrand

Elderly Sweet Home, Inc.

Firm/ Company

Name of Contact Person

8975 SW 88th Street

Address

Miami, FL 33176

City/ State and Zip Code

beaufrand.a@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Alina Beaufrand
 at (305)
 733-3366

 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:

S35 Filing Fee

Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

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

Mailing Address

Street Address

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

#### Articles of Amendment to Articles of Incorporation of

Elderly Sweet Home, Inc.

## (Name of Corporation as currently filed with the Florida Dept. of State)

P19000007776

(Document Number of Corporation (if known)

The new

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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:

Elderly Sweet Home Kendall, Inc.

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:	8975 SW 88th Street	-	020	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	Miami, Fl 33176		ыvн	
			24	- **
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u> )		· .	PH	
	8975 SW 88th Street		÷	Laur'
	Miami, Fl 33176		50	_

## D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent	Alina Beaufrand	
	8975 SW 88th Street	
	(Florida street address)	
<u>New Registered Office Address:</u>	Miami	, Florida
	(City)	(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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

aan Signature of New Registered Agent, if changing

### Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), 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)

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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:

Example: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	<u>Mike Jones</u>	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	Title	Name	Address
1) Change			·
Add			2
Remove			2/120 HAR
2) Change			R 21
Add			
Remove 3 ) Change			<u>بهما</u> <u>المعام</u> ر المعام الم
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets,	idditional Articles, enter change(s) here: if necessary). (Be specific)		
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F. If an amendment provid provisions for impleme	les for an exchange, reclassification, or c nting the amendment if not contained in	ancellation of issued shares,	
(if not applicable, in	ndicate N/A)	the amenument (isen.	
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#### The date of each amendment(s) adoption: \_\_\_\_

date this document was signed.

2/18/2020

Effective date <u>if applicable</u>:

۰.

(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			PIA	د د د محمد ا		
	(voting group)	· . -				
	Dated Signature	i. NTE	50			
	(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)					
	Alina Beaufrand					
	(Typed or printed name of person signing)					

President

(Title of person signing)

\_\_\_\_\_, if other than the

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