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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : T20000000146 Phone : (305)444-4994 Fax Number : (305)328-4774

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN BEHAVIOR CARE SERVICE INC

Certificate of Status	0
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Page Count	05
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A. RAMSEY DEC - 1 2022

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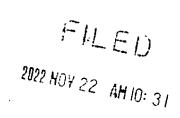
Help

Check if applicable

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

To:

Articles of Amendment to Articles of Incorporation of



BEHAVIOR CARE SERVICE INC				
(Name of Corp.	oration as currently	filed with the Florida Dept	. of State)	
P19000060933				
(T)	Ocument Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this I	lorida Profit Corporation so	lopts the following amendment(s) t	
A. If amending name, enter the new name of t	the corporation:			
			The new	
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp," "chartered," "professional association," or the	"Inc," or "Co". A	ompany," or "incorporated" professional corporation n	or the abbreviation "Corp.," ame must contain the word	
B. Enter new principal office address, if appli		215 SW 17111 AVE		
(Principal office address MUST BE A STREET	"ADDRESS")	STE 214		
		MIAMI, FL 33135		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		215 SW 17TH ST		
		STE 214		
		MIAMI, FL 33135		
D. If amending the registered agent and/or renew registered agent and/or the new regist	gistered office addr tered office address:	ess in Florida, enter the nar	me of the	
Name of New Registered Agent	NGE OF ADDRESS			
	W 17TH AVE STE 2	14	<del></del>	
<del></del>	(Florida str	et address)		
New Registered Office Address: MIAM	MIAMI		, Florida	
	(C'ty)		(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	g Registered Agent: gent. I am familiar w	ith and accept the obligation	is of the position.	
<del>.</del>	Signature of New Re	gistered Agent, if changing	<del></del>	

To: Page: 4 of 6 2022-11-28 23:08:01 GMT 13053284774 From; Yanet Avila

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: PT X Change John Doe X Remove <u>v</u> Mike Jones X Add SΥ Sally Smith Type of Action <u>Addres</u>s <u>Title</u> <u>Name</u> (Check One) 1) XX Change PSD DELLANIRA GONZALEZ 215 SW 17TH AVE **STE 214** \_\_ Add MIAMI, FL 33135 \_\_ Remove 2) \_\_\_\_ Change  $\_$  Add Remove \_\_ Change \_\_ Add \_\_ Remove 4) \_\_\_\_ Change \_\_ Add \_\_ Remove 5) \_\_\_\_ Change \_\_\_\_ Add \_\_ Remove 6) \_\_\_\_ Change \_\_\_\_ Add \_\_\_\_ Remove

Attach addition	adding additional Ai al sheets, if necessary)	(Be specific)	_			
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provisions for	ent provides for an eximplementing the an elicable, indicate N/A)	nendment if not c	eation, or cancell ontained in the ar	ation of issued shar nendment itself:	<u>'&amp;,</u>	

The date of each amendment(s) adop	11/21/2022 tion:	if other than the
date this document was signed.	non:	if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this date will tment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareholder action and	shareholder
■ The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes east for the amendment(s) stent for approval.	
	red by the shareholders through voting groups. The following statement the voting group entitled to vote separately on the amendment(s):	
	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
11/01/0000		
11/21/2022 Dated	·	
2 /./ 3	Dellaria Caracha	
Signature/4/ L (By a direc	Dellanina Gonzalez tor, president or other Oticer of directors or officers have not been	
selected, b	y an incorporator – if in the hands of a receiver, trustee, or other court	
appointed	fiduciary by that fiduciary)	
DE	LLANIRA GONZALEZ	
	(Typed or printed name of person signing)	<u></u>
PS	D	
<del></del>	(Title of person signing)	