P21000103669

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2022 OCT -7 AM 8: 58



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: JCE ETC INC					
DOCUMENT NUMBER: 27000 103669					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Name of Contact Person					
Jill Earp Counseling, Inc.					
1996 Sir Lancelot Circle					
St. Cloud, FL 34772 City/ State and Zip Code					
City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Shannon Earp at (828) 271-4738 Name of Contact Person Area Code & Daytime Telephone Number					
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:					
\$35 Filing Fee					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810					

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation of

Articles of Incor	poration
· VE ETC THIC	
JCE ETC INC (Name of Corporation as currently f	iled with the Florida Dept. of State) 2022 OCT -7 AM 8: 58
P2100010366	
(Document Number of C	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Fle</i> its Articles of Incorporation:	100CE, FL
A. If amending name, enter the new name of the corporation:	
Jill Earp Counseling, Inc.	The new
name must be distinguishable and contain the word "corporation," "con "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A position of the abbreviation "P.A."	npany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable:	1996 Sir Lancelot Circle
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	St. Cloud, FL 34772
	,
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 702635
<u>-</u>	St. Cloud, FL 34770
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent	s in Florida, enter the name of the
(Florida street	address)
New Registered Office Address:	Florida
	(Iy) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations of the position.
Signature of New Regi	stered 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)

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>idot</u> <u>T9</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ke Jones \\ \\ \\ \\	
<u>X</u> Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

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(if not applicable	le, indicate N/A)					
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The date of each amendment(s) adoption: _ date this document was signed.	10/5	22	, if other than the
Effective date <u>if applicable</u> :	(no mbre thun 90)	days after amendment fo	ile date)
Note: If the date inserted in this block does a document's effective date on the Department of		ble statutory filing requ	irements, this date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)		
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators, or bo	ard of directors without	shareholder action and shareholder
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The r approval.	number of votes cast for	the amendment(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			
"The number of votes cast for the amo	endment(s) was/were	sufficient for approval	
by	ting group)	·	
selected, by an inc		r – if directors or officer nands of a receiver, trus	
	Jill C. E (Typed or printed na	me of person signing)	
	President		
	(Title of person sign	ing)	