## Plecus 6820

(Requestor's Name)	
(Address)	2004255
(Address)	200 1200
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	93/11/2401033
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	,
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form for filing Articles of Amendment to amend the articles of incorporation of a Florida Profit Corporation pursuant to section 607.1006. Florida Statutes. This is a basic amendment form and may not satisfy all statutory requirements for amending.

A corporation can amend or add as many articles as necessary in one amendment.

- The original incorporators cannot be amended.
- If amending the name of the corporation, the new name must be distinguishable on the records of the Florida Department of State. A preliminary search for name availability can be made through the Division's website at www.sunbiz.org. You are responsible for any name infringement that may result from your corporate name selection.
- If amending the registered agent, the new agent must sign accepting the appointment and state that he/she is familiar with the obligations of the position.
- If amending/adding officers/directors, list titles and addresses for each officer/director.
- If amending from a general corporation to a professional corporation, the purpose (specific nature of business) must be amended or added if not contained in the articles of incorporation.

If a section is not being amended, enter N/A or Not Applicable. The document must be typed or printed and must be legible.

Pursuant to section 607.0123, Florida Statutes, a delayed effective date may be specified but may not be later than the 90th day after the date on which the document is filed.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (optional) \$8.75

Certificate of Status (optional) \$8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

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

For further information you may call the Amendment Section at (850) 245-6050

CR2E011 (1/20)

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

		TION: ARIAS BEHAVIOR: P22000056820	DRAL SERVICES, INC			
		Amendment and fee are su	bmitted for filing.			
Please return al	ll correspo	ondence concerning this ma	tter to the following:			
	L	conte A. Arias				
	_		Name of Contact Perso	n		
	A	rias Behavioral Services, In	ec.			
			Firm/ Company			
	5	862 West 2 Ct.	• •			
	_		Address			ž
	Н	ialeah, FL. 33012			•	
	<del></del>		City/ State and Zip Cod	e		,
	L	eontearias@gmail.com				
		E-mail address: (to be us	sed for future annual report	notification)	<del></del>	
			·			Ç
For further info	rmation o	oncerning this matter, pleas	se call:			1 0 0 1
Leonte A. Aria			at (	290-3522		
	Name of	Contact Person	Area Co	de & Daytime Telephone	Number	
Enclosed is a cl	heck for t	he following amount made	payable to the Florida Dep	artment of State:		
<b>\$</b> 35 Filing	Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)		
	Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 assee, FL 32314	Ameno Divisio The C 2415 I	Address dment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite assee, FL 32303	810	

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## Articles of Amendment to Articles of Incorporation of

ARIAS BEHAVIORAL SERVICES, IN	of Corporation as curren	the Glad with the Flor	ride Dent of State)
P22000056820	or Corporation as curren	<u>ity inea with the Piot</u>	tua Dept. of State)
	(Document Number	of Corporation (if kno	wn)
Pursuant to the provisions of section 607.  as Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corpo	oration adopts the following amendment
. If amending name, enter the new n			
NEW AGE BEHAVIORAL SERVICES	·		The new
ime must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,	orp." "Inc." or "Co".	A professional corpo	
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS )		N/A	
		N/A	
		N/A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
		N/A	
		N/A	
. If amending the registered agent an	d/or registered office ad	dress in Florida, ente	r the name of the (2)
new registered agent and/or the new			P 0
Name of New Registered Agent	N/A		- 101 <del>- 1</del>
	N/A		
	(Florida s	treet address)	
New Registered Office Address:	N/A		, Florida N/A
Nen Registered Office Address.		(City)	(Zip Code)

Check if applicable

<sup>☐</sup> 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)

Example:

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.

X Change	<u>PT</u>	John Doe		
X Remove	$\underline{\mathbf{V}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) N/A Change	N/A	N/A	N/A	
Add				
Remove 2) N/A Change	N/A	N/A	N/A	
Add				en d Pari Sud
Remove 3 ) N/A Change	N/A	N/A	N/A	· ·
Add				
Remove 4) N/A Change	N/A	N/A	N/A	72 D4
Add				
Remove  N/A Change	N/A	N/A	N/A	
Add Remove				
6) N/A Change	N/A	N/A	N/A	
Add				
Remove				

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:	
If an amandment provides for an archange replacification, or concellation of insued charge.	
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)	
Λ	
	<del></del>
	<del></del>

	N/A	
The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
N/A Effective date <u>if applicable</u> :		
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date vipartment of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement 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 N/A	<b>1</b>	
	(voting group)	2
March 7th 2	2024	-
Dated		
$\sim \ell$	<i>10</i> ()	••
Signature 39		
(By a di	rector, president or other officer - if directors or officers have not been	<u>က</u>
	l, by an incorporator – if in the hands of a receiver, trustee, or other court	0
appoint	ed fiduciary by that fiduciary)	വ
	Leonte A. Arias	
•	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	·····