

PA3000082106

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2024

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Restart Social Club
DOCUMENT NUMBER: P2300008216

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

Please return all correspondence concerning this matter to the following:

Michael Cirullo
Name of Contact Person

Restart Social Club
Firm/ Company

41412 HOLLY DR.
Address

PALM BEACH GARDENS, FL 334
City/ State and Zip Code

SENIORWELLAND@COMCAST.NET
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FL

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For further information concerning this matter, please call:

Michael Cirullo at (561) 684-7564
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 type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy 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

Received
OCT. 2nd 2024



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2024

MICHAEL CIRULLO SR.
4412 HOLLY DR
PALM BEACH GARDENS, FL 33410

SUBJECT: RESTART SOCIAL CLUB INC.
Ref. Number: P23000082106

We have received your document for RESTART SOCIAL CLUB INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Florida not for profit corporation, but your entity is a Florida profit corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Morgan E Lovett
Regulatory Specialist II

Letter Number: 924A00011041

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TALLAHASSEE, FL

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F.Y.I.

March 2, 2024

Morgan E. Lovett
Regulatory Specialist II
Florida Department of State
Division of Corporations

Re: Restart Social Club, Inc.
Ref. number: P23000082106

In order for Restart Social Club to qualify as an IRS 501(c)3 non-profit, the corporation needs at least 3 directors and an ein number.

The only reason for amending the corporation is to comply with these requirements by adding directors and the IRS ein number.

The original amendment forms are being resubmitted for your consideration.
Any recommendations and assistance is appreciated.

Contact information:
email: seniorwellcare@comcast
CC phone: (561) 684-7564
text only phone: (772) 349-5851

Michael D. Cirullo, Sr. COO
Restart Social Club, inc.

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Articles of Amendment
to
Articles of Incorporation
of

Restart Social Club, inc.

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

P23000082106

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this **Florida Not For Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

N/A

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

N/A

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:

N/A

(Florida street address)

New Registered Office Address:

N/A

(City)

Florida

(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.

N/A

Signature of New Registered Agent, if changing

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If amending the Officers and/or Directors, enter the title and name of 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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

Type of Action
(Check One)

Title

Name

Address

1) ☒ Change
☒ Add

Director

Michael Cirullo COO

4412 holly Dr.
Palm Beach Gardens, Fl. 33410

☐ Remove

2) ☒ Change
☒ Add

Director

Bill Neylon gym relations Director

4412 Holly Dr.
Palm Beach Gardens, FL 33410

☐ Remove

3) ☐ Change
☒ Add
☐ Remove

Director

Tara Steinberg Events Director

4412 Holly Dr.
Palm Beach Gardens, FL 33410

4) ☒ Change
☒ Add

DIRECTOR NOELLE DAVIS

4412 HOLLY DR

☐ Remove

5) ☒ Change
☒ Add

DIRECTOR PATRICK ROLLE

PALM BEACH GARDEN
FL. 33410
4412 HOLLY DR
PALM BEACH GARDEN, FL.
33410

☐ Remove

6) ☐ Change
☐ Add

☐ Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

Amend Article III: The Purpose for which this corporation is organized to improve the mental and physical health of those
recovering from substance abuse and to help someone with social issues such as depression, marriage, divorce, smoking and
caregiver issues by having access to affordable support services by integrating social services into the discharge or recovery
such as a gym to relieve triggers and anger, a massage to relieve stress or a rehab coach if lonely or just to have someone to
listen. Restart Social will co-ordinate the services not only for initial recovery, but for the long run.



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

Handwritten lines for amending or adding additional Articles.

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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)

PLEASE RECLASSIFY TO NON-PROFIT
AND PROVIDE DIRECTION FOR
IRS NON-PROFIT STATUS TO EMAIL.

SENIORWELLCARE @ COMCAST.NET

It is Greatly Appreciated.

The date of each amendment(s) adoption: 9/22/2024, if other than the date this document was signed.

Effective date if applicable: When Processed By State
(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 BOARD OF DIRECTORS
(voting group)

Dated 9/22/2023

Signature [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)

MICHAEL D. CIRULLO SR.
(Typed or printed name of person signing)

C.O.O.
(Title of person signing)

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