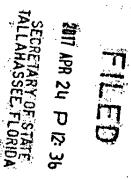
## P94000080/46

Office Use Only

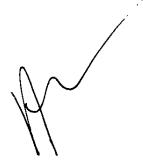


200298270272

04/24/17--01039--006 \*\*43.75



APR 2 8 2017



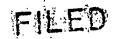
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	Nursing Netwo	ork of Naples, Inc.				
DOCUMENT NUMBER:	P94000080146					
The enclosed Articles of Amend	ment and fee are s	ubmitted for filing.				
Please return all correspondence	concerning this ma	atter to the following:	:			
		Jane E. Cox	K			
<del></del>	Name of Contact Person					
	I	Nursing Network of N	Naples,	Inc.		
		Firm/ Compa	any			
		8813 Tamiami	Trl E			
		Address				
		Naples, FL 3	4113			
<del></del>		City/ State and Z	ip Code			
		nursingnetwork@co	mcast.n	et		
E-ma	il address: (to be u	sed for future annual				
For further information concerning	ig this matter, plea	se call:				
Jane E. Cox		at (2	139	_)		
Name of Contact	Person	A	rea Cod	e & Daytime Telephone Number		
Enclosed is a check for the follow	ving amount made	payable to the Florid	a Depar	rtment of State:		
	.75 Filing Fee & tificate of Status	□\$43.75 Filing For Certified Copy (Additional copy enclosed)		□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address		. <u>§</u>	Street A	Address		
Amendment Section		Amendment Section				
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Nursing Network of Naples, Inc.

(Name of Corporation as	as currently filed with the Florida Dept. of State APR 24 P 12: 3
	P94000080146
(Document)	Number of Corporation (if known)  SECRETARY OF STATIONAL TALLAHASSEE, FLORI
ursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s
. If amending name, enter the new name of the corpor	ration:
	The new corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the previation "P.A."
. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u> )
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	<del></del>
. If amending the registered agent and/or registered of new registered agent and/or the new registered office	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City) , Florida
lew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am	
Signature	e of New Registered Agent, if changing

## 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.

X Change	<u>PT</u>	John Doc			
X Remove	<u>V</u>	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) Change	S	Shirley Ruder	8813 Tamiami Trl E		
Add ·			Naples, FL 34113		
X Remove					
2) Change	S	Ashley E. Scott	8813 Tamiami Trl E		
X Add			Naples, FL 34113		
Remove					
3 ) Change					
Add					
Remove					
4) Change					
Remove					
5) Change					
Add					
Remove		•			
			···		
6) Change					
Add					
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)		
			-
,			
			•
<u> </u>			
•			
f an amendment provides for an exch provisions for implementing the amer	ange, reclassification, or cane	ellation of issued shares,	
(if not applicable, indicate N/A)	ament is not contained in the	machanen usen	

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Cox.	
(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)	-
Jane E. Cox	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>