P96000088615

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	; #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
	·	
Certified Copies	Certificates	of Status
	_	
		 -
Special Instructions to	Filing Officer:	
<u> </u>		

Office Use Only



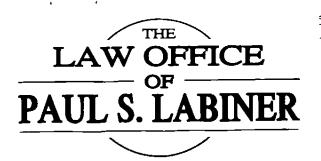
600391510676

07/29/22--01018--011 **35.00



Snund

EOV 0.2 2022 D CUSHING



5499 N. FEDERAL HIGHWAY • SUITE K • BOCA RATON, FL. 33487

TEL: (561) 998-2362

FAX: (561) 998-2358

E-MAIL: paul@plabineresq.com

www.BocaRatonEstatePlanning.com

July 28, 2022

Via FedEx

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Articles of Amendment for East Cypress Women's Center, Inc.

Dear Sir/Madam,

Enclosed are the following documents related to the above file:

- 1. Cover letter:
- 2. Articles of Amendment to Articles of Incorporation; and
- 5. Our check in the amount of \$\$35.00 for the filing fee.

Please contact me if you have any questions. Thank you in advance.

Sincerely,

Sam Ballen

/sb Enclosures

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: East Cypress Won	nen's Center, Inc.		
DOCUMENT NUM	1BER: P96000088615			
	es of Amendment and fee are su	bmitted for filing.		
Please return all corr	respondence concerning this ma	tter to the following:		
	Sam Ballen			
		Name of Contact Person	1	
	Law Office of Paul Labiner			
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·	
	5499 N. Federal Highway, St	uite K		
		Address		
	Boca Raton, FL 33487			
		City/ State and Zip Cod	e	
	sam@plabineresq.com			
	E-mail address: (to be us	sed for future annual report	notification)	2 07
				, <u>(</u>
For further informat	on concerning this matter, pleas	se call:	 .	· 29
Sam Ballen		, 561	251-8391	
Name	e of Contact Person	at (Area Co) de & Daytime Telephone Number	- F
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:	بة. د. ن
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
At Di P.	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

East Cypress Women's Center, Inc.

(Document Number of Corporation (if known) ant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) ticles of Incorporation:	Traine	of Corporation as currently	filed with the Florida Dept. of Sta	<u>ite</u>)		
ant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) ticles of Incorporation: The new must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word tered." "professional association," or the abbreviation "P.A." Inter new principal office address, if applicable: Inter new mailing address MAY BE A POST OFFICE BOX) Inter new mailing address if applicable: Inter new mailing address if applicable interest in a post interest inter	96000088615					
amending name, enter the new name of the corporation: The new must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word tered." "professional association," or the abbreviation "P.A." Inter new principal office address, if applicable: cipal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: dialing address MAY BE A POST OFFICE BOX) Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address in Florida, enter the name of the main and/or registered office address in Florida, enter the name of the main and/or registered office address: Name of New Registered Agent Sam Ballen 5499 N. Federal Hwy, Suite K		(Document Number of	Corporation (if known)			
must be distinguishable and contain the word "corporation," "company." or "incorporated" or the abbreviation "Corp.," " or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word tered." "professional association," or the abbreviation "P.A." Inter new principal office address, if applicable: Cipal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Adiling address MAY BE A POST OFFICE BOX) Amending the registered agent and/or registered office address in Florida, enter the name of the ew registered agent and/or the new registered office address: Name of New Registered Agent S499 N. Federal Hwy, Suite K	ursuant to the provisions of section 607 Articles of Incorporation:	.1006, Florida Statutes, this F	lorida Profit Corporation adopts th	e followin	g ameno	lment(s
must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "or Co.," or the designation "Corp," "lnc," or "Co". A professional corporation name must contain the word tered," "professional association," or the abbreviation "P.A." Inter new principal office address, if applicable: "cipal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: "Company of the abbreviation "P.A." Inter new mailing address MUST BE A STREET ADDRESS (Company of the abbreviation "Corp.," "or "Co". A professional corporation name must contain the word tered." "professional association," or the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new mailing address, if applicable: "Company of the abbreviation "Corp.," "or "Co". A professional corporation name must contain the word tered." "professional corporation name must contain the word tered." "professional association," or the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable: "Company of the abbreviation "P.A." Inter new principal office address in applicable	. If amending name, enter the new n	ame of the corporation:				
" or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word tered," "professional association," or the abbreviation "P.A." Inter new principal office address, if applicable: Cipal office address MUST BE A STREET ADDRESS) Inter new mailing address, if applicable: Adailing address MAY BE A POST OFFICE BOX) Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address MAY BE A POST OFFICE BOX Inter new mailing address in florida, enter the name of the interest registered agent and/or the new registered office address: Name of New Registered Agent Sam Ballen Sam Ballen Sam Ballen Sam Ballen Sam Ballen					_The 1	1ew
nter new mailing address, if applicable: Adailing address MAY BE A POST OFFICE BOX amending the registered agent and/or registered office address in Florida, enter the name of the two registered agent and/or the new registered office address: Name of New Registered Agent 5499 N. Federal Hwy, Suite K	nc.," or Co.," or the designation "C	Corp," "Inc," or "Co". A				
Adming address MAY BE A POST OFFICE BOX amending the registered agent and/or registered office address in Florida, enter the name of the we registered agent and/or the new registered office address: Name of New Registered Agent 5499 N. Federal Hwy, Suite K						_
Adming address MAY BE A POST OFFICE BOX amending the registered agent and/or registered office address in Florida, enter the name of the we registered agent and/or the new registered office address: Name of New Registered Agent 5499 N. Federal Hwy, Suite K				• 7		_
Adming address MAY BE A POST OFFICE BOX amending the registered agent and/or registered office address in Florida, enter the name of the we registered agent and/or the new registered office address: Name of New Registered Agent 5499 N. Federal Hwy, Suite K					<u>-</u>	_
amending the registered agent and/or registered office address in Florida, enter the name of the w registered agent and/or the new registered office address: Name of New Registered Agent Sam Ballen 5499 N. Federal Hwy, Suite K	C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				202	
amending the registered agent and/or registered office address in Florida, enter the name of the wregistered agent and/or the new registered office address: Name of New Registered Agent			" .:			
amending the registered agent and/or registered office address in Florida, enter the name of the we registered agent and/or the new registered office address: Name of New Registered Agent 5499 N. Federal Hwy, Suite K						-
Name of New Registered Agent Sam Ballen 5499 N. Federal Hwy, Suite K						 :
Name of New Registered Agent Sam Ballen 5499 N. Federal Hwy, Suite K			ss in Florida, enter the name of th	<u>ie</u>		
5499 N. Federal Hwy, Suite K					C'>	
	<u>Name of New Registered Agent</u>	5499 N. Federal Hwy Suite	К	1	_ 0,	
					_	
Now Payintaged Office Address Boca Raton, FL		Boca Raton, FL Sheeida 33487		33487		
<u>New Registerea Office Address:</u> Florida	New Basiness LOS	Doca Raton, 1 L				
New Registered Office Address: Boca Raton, FL Florida 33487	new registered agent and/or the ne-	Sam Ballen 5499 N. Federal Hwy, Suite (Florida street)	K et address)	33487	C12	
(City) (Zip Code)	New Registered Office Address:			a	Codo)	_

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)

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	<u>V</u>	Mike Jones	
X Add	<u>§V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	Leda Lanza	962 East Cypress Creek Rd
X Add			Fort Lauderdale, FL 33334
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add		_	
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
nrovicione for implementing the	ndment if not contained in the amendment itself:
(if not applicable indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

.

٠

	7/21/2022	
	loption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after am	endment file date)
Note: If the date inserted in this b document's effective date on the De		filing requirements, this date will 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 directo	ors without shareholder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of vot fficient for approval.	es cast for the amendment(s)
	roved by the shareholders through voting groeach voting group entitled to vote separately	
"The number of votes cast	for the amendment(s) was/were sufficient for	approval
by		."
•	(voting group)	
7/21/2022		
Dated		
S:	pan W Einster	-
Signature	rector, president or other officer – if directors	ar officers have not been
selected	l, by an incorporator - if in the hands of a rec	eiver, trustee, or other court
	ed fiduciary by that fiduciary)	errei, it disect of other court
	Joan Weinstein	
	(Typed or printed name of person	signing)
	President/Secretary	
	r resident/ secretary	

(Title of person signing)