2011-10-17 15:12 TRIAD

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Florida Department of State
Division of Corporations
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Account Number : I20020000094
Phone : (770)777-2091
Fax Number : (770)220-1943

Enter the email address for this business entity to be used for Fabure annual report mailings. Enter only one email address please.

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF COR	PORATION:	Laylor Morrison of Florida	, Inc.
DOCUMENT N	UMBER:	F75785	
The enclosed Arti	icles of Amendment and fee	are submitted for filing.	
Please return all c	correspondence concerning t	this matter to the following:	
		Sharon K. Gray	
	Name of Contact Person		
	Triad F	Professional Services, LLC	
	Firm/ Company		
	1720 Windward Concourse, Ste. 390		
	Address		
	А	lpharetta, GA 30005	
		City/ State and Zip Code	
	jbade E-mail address: (to be u:	en@triadpros.com	
For further inform	ation concerning this matter	r, please call:	
	Sharon K. Gray	at (770 77	7-2091
Name	of Contact Person	Area Code & Daytime Tele	phone Number
Enclosed is a chec	k for the following amount	made payable to the Florida Depart	ment of State:
\$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
P.O. Box 6	nt Section Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	•

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Articles of Amendment **Articles of Incorporation**

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	Articles of Amendment	WII OCT
	to	4150pm 17
	Articles of Incorporation	ANJAR.
	of	NS Charles
Ta	ylor Morrison of Florida, Inc.	
(Name of Corpora	tion as currently filed with the Florida Dept. of Sta	te)
	F75785	
(Do	ocument Number of Corporation (if known)	
endment(s) to its Articles of inc	tion 607.1006, Florida Statutes, this Florida Profit Corporation:	maying the tollowing
If amonding name antartha	NAW TIME of the councilia-	
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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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP	Jeffery A. Mickle	11300 Mirasol Boulevard Palm Beach Gardens, FL 334	_ □ Add 18 ☑ Remove
<u>VP</u>	Jason B. Frost	501 N. Cattlemen Road. Ste. 1 Sarasota, Et. 34232	00 □ Add □ ☑ Remove
(alluch qu	ddistonal sheets, if necessary). (Be spe	ecific)	
f. <u>Ifon</u> an	endment provides for an exchange, r	eclassification, or cancellation of is	sued shares,
provision (If no	ons for implementing the amendment in applicable, indicate N/A)	f not contained in the amendment	itself;

The date of each amendment	(s) adoption: October 7, 2011
	(date of adoption is required)
Effective dute if applicable;	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement of 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)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated 10/1	4/2011
Signature	Caroline G. Estrada
(By	a director, president or other officer - if directors or officers have not been
	cted, by an incorporator - if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Caroline G. Estrada
	(Typed or printed name of person signing)
	Assistant Secretary
	(Title of person signing)