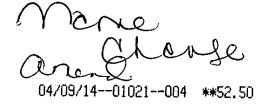
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(Requestor's Name)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: The National	Community Network and coulition or Highlands EAC
DOCUMENT NUMBER: NØ90001	0173
The enclosed Articles of Amendment and fee are submitt	ed for filing.
Please return all correspondence concerning this matter to	the following:
Frank Poul Jones	
	ame of Contact Person)
The National Community Network	and coolition of Highlands, INC (Firm/Company)
923 Swl	h A Avenue
	(Address)
Avm Park Fl	33825
Avon Park, FL 3	ity/ State and Zip Code)
NCNCHINC © O	r future annual report notification)
For further information concerning this matter, please cal	i:
Frank Paul James	at (863) 657-2407
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payab	ole to the Florida Department of State:
(Additional copy is enclosed) D\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is Enclosed)
Mailing Address	Street 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

FILED

of	-u. 0. 1 2
The National Community Network &	Coolition ONH APRILLIANS, INC
(Name of Corporation as currently filed with the Florida Dep	t. of State)
NO COOLL A 103	t. of State) TALLATIASSEE, FLORIBA
NOGOGOLO 173 (Document Number of Corporation	1 (if known)
(Socialist Valles of Golpotation	. (mis)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida</i> amendment(s) to its Articles of Incorporation:	orida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corporation;	
The NGHICOGI Community Noname must be distinguishable and contain the word "corporation" or	Stwork, INC 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:	<u>r</u>
(Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(Maning damess MAT BE A TOST OTTICE BOX)	
	
D. If amending the registered agent and/or registered office addres	s in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent: HIP	
/Florida st	reet address)
New Registered Office Address:	eet auaressy
(City)	, Florida (Zip Code)
(Cuy)	(z.ip Code)
New Registered Agent's Signature, if changing Registered Agent:	
l hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position.
ula	
NIA Signature of New Registere	ed Agent, if changing

Page 1 of 4

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 <math>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.

Type of Action (Check One) Title Name Address 1) Change Add Add Add Add	
AddRemove 2)ChangeAddRemove 3)ChangeAddRemove 4)ChangeAddRemove 5)Change	
Remove	
2)Change	
Remove	
3) Change	
Remove	
Add	
Add	
Remove	
5) Change	
Add	
Remove	
6) Change	
Add	
Remove	

The date of each amendment(s) adopt	ion:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopte was/were sufficient for approval.	ed by the members and the number of votes cast for the amendment(s)	
There are no members or members adopted by the board of directors.	entitled to vote on the amendment(s). The amendment(s) was/were	
Dated 7 🗡	pril 2014	
Signature #	· Phr	
	or vice chairman of the board, president or other officer-if directors	
	elected, by an incorporator – if in the hands of a receiver, trustee, or pinted fiduciary by that fiduciary)	
	nk Paul Janes	
<u>(</u> Ty	ped or printed name of person signing)	
Pr Pr	esident ¿ CZO	
	(Title of person signing)	