## 743391

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(City	y/State/Zip/Phon	e #)
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C. GOLDEN APR - 4 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATIO	Carver Heights Senio		ration			
	743391					
The enclosed Articles of Ame	endment and fee are subm	nitted for filing.				
Please return all corresponder	nce concerning this matter	r to the following:				
Elbert Jones						
		(Name of Contact	Person)			
Carver Heights Senior Citize	ns Board Of Directors, In	nc.				
		(Firm/ Compa	ny)			
4250 Woodbridge Road						
		(Address)	<del> </del>			
Tallahassee, FL 32303						
	(	(City/ State and Zip	p Code)			
E-	mail address: (to be used	for future annual r	eport notifi	cation	<del>,</del>	
For further information conce	·		•		•	
Elbert Jones			850 at		294-9659	
(	Name of Contact Person)		(Area Co	ode)	(Daytime Telephone Number)	
Enclosed is a check for the fo	llowing amount made pay	yable to the Florida	a Departme	nt of S	itate:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fe Certified Copy (Additional copy enclosed)	/ is (	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)	

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED

CARVER HEIGHTS SENIOR CITIZENS INCORPORATED

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

(Document Number of Corporation (if known)

Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following		
A. If amending name, enter the new name of the corporation	on;		
Carver Height Seniors Citizens, Board Of Director, Inc.	The new		
name must be distinguishable and contain the word "corporate "Company" or "Co." may not be used in the name.	ion" or "incorporated" or the abbreviation "Corp." or "Inc."		
B. Enter new principal office address, if applicable:	Elbert Jones		
Chairman and a state of the sta	4250 Woodbridge Road		
	Tallahassee, Fl 32303		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office agent.			
Name of New Registered Agent:	bert Jones		
New Registered Office Address:	(Florida street glidress)  Lanabel Florida 32303 (City) (Zip Code)		
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fan	Agent:		

Page 1 of 4

Signature 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.

Example: X Change X Remove X Add	<u>V</u> Mil	n <u>Doe</u> te Jones ly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) X Change	P/D	Elbert Jones	4250 Woodbridge Road
Add			Tallahassee, FL 32303
Remove			
2) Change	VP/D	Mack Byrd	4th Street S.E.
x Add			Havana, FL 32333
Remove	S/D	Melissa Gregory	340 Glade Road
3 ) Change x Add	<del></del>		Havana, FL 32333
Remove			
4) Change	T/D	Elizabeth Russ	176 Neal Temple Road
x Add	***************************************		Havana, FL 32333
Remove			
5) Change	D	Michele Bailey	P. O. Box 356
X Add			Havana, FL 32333
Remove			
6) Change	D	David Washington	129 Beauful Road
x Add			Havana, FL 32333
Remove			

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.

Example:			
X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
7)Change	<u>D</u>	Andrea McGill	629 Gibson Road
x Add			Havana, FL 32333
Remove			
8)Change	<u>S</u>	Chambers, Ella	105 Birch Street
Add			Havana, FL 32333
x Remove			
9)Change	<u>D</u>	Kemp, Bertha	129 Tyre Street
Add			Havana, FL 32333
x Remove			
10)Change	D	Norwood, Donald	308 Red Fern Road
Add			Havana, FL 32333
x Remove			
11)Change	D	Jackson, Carl	903 S. Main Street
Add			Havana, FL 32333
x Remove			

E. If amending or adding additional A (attach additional sheets, if necessary)	rticles, enter change(s) here: ). (Be specific)		·
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	he date of each amendment(s) adoption:, if of ate this document was signed.	ther than th
Effe	ffective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
	ote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed occument's effective date on the Department of State's records.	d as the
Ado	doption of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
8	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	April 3, 2018 Dated	
	Signature Effect Janes	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	Elbert Jones	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	