## 74086

	questor's Name)	
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PICK-UP	WAIT	MAIL
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FILED
12 JUN 20 PM 2: 34
SEETATINGSLESSLOWING

Amend JUN 2 1 2012, T. CAULEY

## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Name of Contact Person) (City/ State and Zip Code) For further information concerning this matter, please call: (Name of Contact Person) (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □ \$35 Filing Fee □\$52.50 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed)

## **Mailing Address**

TO: Amendment Section

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

Artic	cles of Amendment	FRED
Artic	to les of Incorporation	- ··· ··· ··· ···
1 1	of	12 JUN 20 PM 2: 31
. Jordan Group	Homes, Inc	SEMMETARY OF STATE
(Name of Corporation as currently filed with the F	lorida Dept. of State	MALLAHASSEE MEGRIE
01010810		
(Document Number of Corpo	oration (if known)	<del></del>
Pursuant to the provisions of section 617.1006, Florida Statuamendment(s) to its Articles of Incorporation:	ites, this <i>Florida Not For Profit Corpo</i>	oration adopts the following
A. If amending name, enter the new name of the corpora	ation:	
	. I A	
ways worth distinguish No and contain the way "come	~ / /	The new
name must be distinguishable and contain the word "corpor <u>"Company" or "Co." may not be used in the name</u> .	ration or incorporated or the abbr	eviation "Corp." or "inc.
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRES:</u>	Σ)	
	<del></del>	<del></del>
C. Enter new mailing address if applicables	LL / A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	- / /.	
	****	
D. If amending the registered agent and/or registered of		me of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent:		_
	,   _	
	(Figrida streft address)	-
New Registered Office Address:		
	Florida	
(Cit	, Florida (V) (Zip C	1 Code)
		,
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am	<u>ed Agent:</u> familiar with and accept the obligation	ns of the position.
Signature of New Reg	gistered 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.

Example: X Change	PT John	<u>1 Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
_X Add	SV Sali	y Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add Add Remove	D	Michael Coley	6318 NW 14th C
2) Change Add Remove			
3 ) Change Add Remove			
4) Change Add Remove	**************************************		
5) Change Add Remove	<u></u>	<del></del>	
6) Change Add Remove			

f amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
·····	
V	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) ado	ption: 06-18-0012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were ado was/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or membe adopted by the board of directors	rs entitled to vote on the amendment(s). The amendment(s) was/were s.
Dated Signature	4.78,2012 lie hidan
(By the chairm	an or vice nairman of the board, president or other officer-if directors
	selected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)
	Halle Jordan  Typed or printed name of person signing)
**************************************	(Title of person signing)