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A. Butler 9/8/21

	-	<u>COVER LET</u>	<u>ter</u>		
TO: Amendment Section Division of Corporations					
NAME OF CORPORATIO:	Fannie E. Taylor Ho N:			r, Inc.	
7( DOCUMENT NUMBER:	54469			<mark>.</mark>	
The enclosed Articles of Ame.	ndment and fee are sub-	mitted for filing.			
Please return all corresponden	ce concerning this matte	er to the following	:		
Retha Potgieter					
		(Name of Contact	Person)		
Taylor Foundation Services					
		(Firm/ Comp	any)		
6601 Chester Avenue					
		(Address)	)		
Jacksonville, Florida, 32217					
		(City/ State and Z	ip Code)		
rpotgieter@taylor-residences.	org				
E-1	mail address: (to be used	d for future annual	report not	ification	n)
For further information conce	rning this matter, please	e call:			
Retha Potgieter			904 at		636-0313
()	Name of Contact Person	i)		Code)	(Daytime Telephone Number)
Enclosed is a check for the fol	llowing amount made pa	ayable to the Florid	da Departr	nent of	State:
□ \$35 Filing Fee 1	■\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional cop enclosed)		Certifi Certifi	0 Filing Fee feate of Status fed Copy tional Copy is osed)
<u>Mailing</u> Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327			ent Section of Corpo tre of T Monroe	orations 'allahassee e Street, Suite 810

## Articles of Amendment to Articles of Incorporation

	Articles of Incorporation of		FLED
Fannie E. Taylor Home for the Aged-Care Center,	Inc.		_2021_AUS_26PH_3:-15
(Name of Corporation as currently filed with the	: Florida Dept.	. of State)	
764469			SECREDIC I OF STATE
(Docun	nent Number of	Corporation (if known)	INELIFY GLE, FL
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statutes, th	nis Florida Not For Profit Cor	poration adopts the following
A. If amending name, enter the new name of the	<u>e corporation:</u>		
The Fannie E. Taylor Home for the Aged-Care Cer	nter, Inc		The new
name must be distinguishable and contain the word "Company" or "Co." may not be used in the name		" or "incorporated" or the abl	previation "Corp." or "Inc."
B. Enter new principal office address, if applica	ble: N/J	A	
(Principal office address <u>MUST BE A STREET A</u>		4-1	
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE</u>	<u>BON</u> ) <u>N/</u>	A	
D. If amending the registered agent and/or reginnew registered agent and/or the new register			ame of the
Name of New Registered Agent.	N/A		
		(Florida street ad	dress)
<u>New Registered Office Address</u> :			
	N/A		Florida

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<u>New Registered Agent's Signature, if changing Registered Agent:</u> *Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.* 

(City)

Signature of New Registered Agent, if changing

(Zip Code)

## 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: <u>X</u> Change <u>X</u> Remove <u>X</u> Add	<u>PT John I</u> <u>V Mike .</u> <u>SV Sally S</u>	lones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) <u>N/A</u> Change Add	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
Remove			
2) <u>NA</u> Change Add	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
3 ) <u>N/A</u> Change Add Remove	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
4) <u>N/A</u> Change Add	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
Remove			
<i>5) <u>N/A</u> Change</i> Add	<u>N/A</u>	<u>N/A</u>	<u>N/A</u>
Remove			<u>_,</u>
6) <u>N/A</u> Change Add	<u>N/A</u>	N/A	<u>N/A</u>
Remove			
F. If amonding or add	ing additional Ar	ticles onter chanue(s) here:	

\_\_\_\_\_

\_\_\_\_\_

## E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

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•	<b>,</b> •		

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The date of each amendment(s) adoption:	 ,	if other than the
date this document was signed.		

Effective date <u>if applicable</u>: \_\_\_\_\_

(no more than 90 days after amendment file date)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (<u>CHECK ONE</u>)

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated	08/10/2021
Dateu	
Signature	okn w. Barty &
(	(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)

John W. Barber, Jr.

(Typed or printed name of person signing)

CEO

(Title of person signing)