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THE VIRGINIA H. EVANS FAMILY 8163 GREEN GLADE ROAD JACKSONVILLE, FL 32256

City/State/Zip

Phone #

	Office Use Only			
ORPORATION NAME(S) & DOCU	MENT NUMBER(S), (if known):			
	-05/19/0001112001 *****52.50 *****52.5			
(Corporation Name)	(Document #)			
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☐ Walk in ☐ Pick up time _	Certified Copy			
☐ Mail out ☐ Will wait	Photocopy Certificate of Status			
	田田			
NEW FILINGS	AMENDMENTS ⊆ ₩			
Profit	Amendment SH 2			
Not for Profit	Resignation of R.A., Officer/Director			
Limited Liability	☐ Change of Registered Agent			
Domestication	Dissolution/Withdrawal			
Other	Change of Registered Agent Dissolution/Withdrawal Merger Resignation of R.A., Officer/Director The control of R.A., Officer/Directo			
OTHER FILINGS	REGISTRATION/QUALIFICATION			
Annual Report	☐ Foreign			
Fictitious Name	☐ Limited Partnership			
	Reinstatement			
	Trademark			
	Other			
	Examiner's Initials			
	Examiner's initials			

CR2E031(7/97)

B017727

CERTIFICATE OF AMENDMENT TO

CERTIFICATE OF LIMITED PARTNERSHIP OF

HE	VIRCINIA H. EVANS	FAMILY	LIMITED	PARTNE	RSHIP
				·	
-	(Insert name cu	creatly on file with Flo	orida Dept. of State)		*****
Pursi	mant to the provisions of section 620.109, l	Florida Statutes, tl	his Florida limited	partnership, whose	certificate
was i	filed with the Florida Dept. of State on	113	194	, adopts the	following
certif	ficate of amendment to its certificate of lin	nited partnership.			
	ST: Amendment(s): (indicate article num				
AME	ENDMENT TO ARTICLE	31/3	GENERAL	PARTNE	ers:
Vir	GINIA H. EVANS, GENE	ERAL PART	NER ASS	16NED H	FR
GE	WELAL PARTNERSHIP IN	uterest	TO PORSE	RT H. EL	ans
As	s 0 = 12/31/99.	en Suma m		Ti ff a mada babasasan	ب بیانگشیم ده سر
LEG OR Pu	EM. EVANS AND RO ENTITY SUBSEQUENTLY TSVANT TO THE TERM	BERT H. y become is of T	EVANS A USG A GE THE PART	WERSHIP	AGREEM?
SEC of Sta	OND: This certificate of amendment shall ate.	l be effective at th	ue time of its filing	with the Florida D	epariment
	RD: Signature(s) ature of current general partner: YIRGINIA	MAH. C	lane "po	LADA ATTA	Actived"
Signa	ature(s) of new general partner(s), if applic	able:			
	Pobler	H. EVANS,	DENECKL	PARTNER	· -

FILE COPY

POWER OF ATTORNEY

KNOW ALL MEN BY THESE PRESENTS, that I, VIRGINIA H. EVANS, of 435 Chestnut Street, Meadville, Crawford County, Pennsylvania 16335, have made, constituted and appointed and by these presents do make, constitute and appoint my son, LEE M. EVANS, of 8163 Green Glade Road, Jacksonville, Florida 32216, whose signature is:

and my son, NOBERT H. EVANS, of 18 Hickory Lane, Fishersville, Virginia 22939, whose signature is:

my true and lawful attorneys, for me and in my name and on my behalf, to ask, demand, recover, and receive all and any sum or sums of money, debts, dues, merchandise or effects due, payable and belonging to me, from any person or persons whatsoever;

to sell all or any part of such goods, merchandise and effects which may come to their possession and knowledge, on such oredit and for such prices as they may deem meet;

to purchase any goods, merchandise or other commodities on my account for such prices and to such amount as they may deem meet, and the same to sell again for my benefit and on my account for any price whatsoever; to accept any bill or bills of exchange or orders, to borrow money and to make and execute any note or notes of hand with or without confession of judgment clauses, bond or bonds, mortgages, encumbrances or other instruments or contracts, in my name and on my account, to and for any amount which they may deem meet or expedient;

to compound for any debts, dues or demands or claims of any nature owing or which may hereafter be owing to me, whether arising out of contract or tort, and to take less than the whole or otherwise to agree for the same, in such manner and upon such terms as they, in their discretion, may deem proper;

and for all or any purposes to make and execute any releases, compromises, compositions, agreements or contracts, by deed or otherwise, in their opinion necessary and expedient in the premises;

to pay and discharge all debts and demands due and payable or which may hereafter become due and payable by me unto any person or persons whatsoever;

to enter onto any lands or other real estate to which I am or may be entitled and recover the possession thereof and damages for any injury done thereto, and to distrain for rent due thereon; to commence and prosecute until final judgment and execution any suit or suits, action or actions arising out of contract, negligence, tort or otherwise, which they shall deem proper for the recovery, possession or enjoyment of any matter or thing

which is or may hereafter be due, payable, owing, belonging, accruing, or appertaining to me for or by reason of any matter or thing of any nature whatsoever;

and in any such suits or actions, for me to appear and plead before any courts or tribunals having jurisdiction thereof, and all stipulations, recognizances and other requisites in any suits or action to allow and establish;

to determine the said suits or actions and any questions arising in the same, by arbitration or any compromise, and of all receipts and recoveries in the premises, due acquittances and discharges to execute and deliver;

to draw checks on any account or accounts that I may now have or may hereafter establish in any bank or trust company or other financial institution; to withdraw money therefrom and to endorse checks, bills, notes or other negotiable or non-negotiable instruments which may be payable to my order;

to cash or redeem U.S. Savings Bonds, including but not limited to Series E, EE, H, and HH;

obtaining the proceeds thereof in cash or depositing the same to any account either in my name or in the name of another;

to enter any safe-deposit box at any bank or similar institution and remove property therefrom;

to make gifts;

to create a trust for my benefit;

to make additions to an existing trust for my benefit;

to disclaim any interest in property;

to renounce fiduciary positions;

to withdraw and receive the income or corpus of a trust;

to file and execute all tax returns, state, federal and local;

to authorize my admission to a medical, nursing, residential or similar facility and to enter into agreements for my care; to authorize medical and surgical procedures;

and generally to perform and do all matters and things, transact all business, make, execute, and acknowledge all contracts, orders, deeds, writing, assurances, releases and instruments which may be requisite or proper to effectuate all or any of the premises or any other matter or thing appertaining or belonging to me with the same powers and to all intents and purposes with the same validity as I could, if personally present;

giving and granting unto my said attorneys full power to substitute one or more attorney or attorneys under my said attorneys, in or concerning the premises or any part thereof, and the same at their pleasure to revoke and hereby ratifying and confirming whatsoever my said attorneys in fact or their substitute or substitutes shall and may do by virtue hereof in the premises.

This power of attorney shall not be affected by the disability of the principal and it is hereby declared to be the

intent of the principal that all authority conferred upon the attorneys in fact by this document shall be exercisable notwithstanding any mental or physical disability or incapacity and notwithstanding any uncertainty as to whether the principal may be dead or alive. All acts done by the attorneys in fact pursuant to the power granted herein during any period of physical or mental disability or incompetence of the principal, or uncertainty as to whether the principal is dead or alive shall have the same effect and inure to the benefit of and bind the principal and her heirs, legatees, devisees and personal representatives in the same manner as though the principal were alive, competent, and not disabled at the time of such exercise.

Each of the above-named attorneys in fact shall have each and every of the foregoing powers, and it is not necessary for said attorneys to act jointly.

IN WITNESS WHEREOF, I have hereunto set my hand and seal this 20th day of 1993.

VIRIGINIA H. EVANS (SEAL)

Withesa

Witness

STATE OF PENNSYLVANIA

. . 881

COUNTY OF CRAWFORD

On this the 20th day of August , 1993, before me, a Notary Public, personally appeared VIRGINIA H. EVANS, the person whose name is subscribed to the within instrument and acknowledged that she executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Notary Public

My Commission Expires:

12-01-94

Noterial Seel Fernels A. Mohre, Notery Public Mesdville, Crawlord County My Commission Expires Dec. 1, 1994 STATE OF FLORIDA COUNTY OF DUVAL

SS:

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Mary Lee B. Solthe Notary Aublic

My Commission Expires;

STATE OF PENNSYLVANIA

COUNTY OF CRAWFORD

55:

On this the 20th day of August , 1993, before me, a Notary Public, personally appeared ROBERT H. EVANS, the person whose name is subscribed to the within instrument and acknowledged that he executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

Notary Public

My Commission Expires:

12-01-94

Nictaris I Seal Pamela A. Mohra, Notary Public Maadville, Crawford County My Commission Explus Dec. 1, 1884