F05600005086

(Re	equestor's Name)	
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
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TOTAL SOLUTION TO SERVICE SERV

COVER LETTER

and

TO: Amendment Section Division of Corporations	i.	
SUBJECT: The Sunsh	ine House, Inc	
DOCUMENT NUMBER: FOS	(Name of Corpo 5000005086	ration)
The enclosed <i>Resolution of the</i> fee are submitted for filing.	Board of Directors to With	ndraw the Alternate name for use in Florida
Please return all correspondence	concerning this matter to t	he following:
Shannon Parnell		
(Name of Conta	et Person)	-
The Sunshine Ho		_
(Firm/Con		
12 Interchange B		_
Greenville, SC 29	607	_
For further information concerni	ng this matter, please call:	
Shannon Parnell	at (864_	,990-1820 x793
(Name of Contact Persor	i) (Area Code	& Daytime Telephone Number)
Enclosed is a check made payab	le to the Florida Departmet	nt of State for the following amount:
	rificate of Status — — Certifi	5 Filing Fee & S52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Addres Amendment S Division of Co Clifton Buildi 2661 Executiv	ection orporations

Tallahassee, FL 32301

CR2E124 (04/12)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESOLUTION OF THE BOARD OF DIRECTORS TO WITHDRAW THE ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Shannon Parnell	, do hereby certify
(Name)	
that this Resolution of the Board of Directors of	
The Sunshine House, Inc.	,
(Name of Corporation	•
a corporation duly organized and existing under the laws of	South Carolina (State or Country)
	(State or Country)
was adopted on April 9, 1975	withdrawing the alternate
name of The Sunshine House of South	Carolina Inc
name of (Current Alternate	
in Florida as its real name is available in Florida.	
	. ,
Date: 10/17/2017	201
	2017 OC
	Accounting Supervisor
Signature of Chairman, Vice Chairman of the Board, a	Title of person signing
different of any officer	<u>ر</u> ج
FILING FEI	S35 S S S S S S S S S S S S S S S S S S
Make checks payable to Florida Dep Division of Corp	artment of State and mail to;
P.O. Box ô Tallahassee, FI	