

Division of Corporations

Page 1 of 1

1245010

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

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To: Division of Corporations  
Fax Number : (850)617-6380

**\*RE-SUBMIT\***

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850)222-1092  
Fax Number : (850)878-5368

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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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Florida Department of State  
Division of Corporations  
Tallahassee, Florida

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
CONDEV CORPORATION**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2014 Jun-4 A 1:01

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**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Condev Corporation

DOCUMENT NUMBER: K45010

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Russell W. Fleming

Name of Contact Person

c/o American Apartment Management Company, Inc.

Firm/ Company

2479 Aloma Avenue

Address

Knoxville, Tennessee 37902

City/ State and Zip Code

rfleming@uameci.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deedra A. Burroughs

at ( 865 )

525-7500 x229

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:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 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 Address**

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

850-617-6381

6/5/2014 9:56:33 AM PAGE 1/001 Fax Server



June 5, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

CONDEV CORPORATION  
PO BOX 1748  
WINTER PARK, FL 32790

SUBJECT: CONDEV CORPORATION  
REF: K45010

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please file the document as either Articles of Amendment or Restated Articles of Incorporation pursuant to applicable Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

FAX Aud. #: H14000130007  
Letter Number: 514A00012094

**\*RE-SUBMIT\***

Please retain original filing  
date of submission 6/4

RECEIVED  
14 JUN -5 AM 9:22  
FAX

Articles of Amendment  
to  
Articles of Incorporation  
of

Condeev Corporation

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

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607, 1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

AAMCI Corporation

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

155 Office Plaza Drive

Suite A

Tallahassee, Florida 32301

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

Capitol Corporate Services, Inc.

155 Office Plaza Drive, Suite A

(Florida street address)

New Registered Office Address:

Tallahassee

(City)

Florida

32301

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Dilani Case, asst. sec.

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:

☒ Change      PT      John Doe  
☒ Remove      V      Mike Jones  
☒ Add      SV      Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	VS	Robert N. Gardner	2479 Aloma Avenue Winter Park, FL 32792
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	PT	Joseph J. Gardner	2479 Aloma Avenue Winter Park, FL 32792
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	P	Winter	c/o Am Apt Management Co, Inc. 708 South Gay Street, Suite 200 Knoxville, Tennessee 37902
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	ST	Deedra Burroughs	c/o Am Apt Management Co, Inc. 708 South Gay Street, Suite 200 Knoxville, Tennessee 37902
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	Thomas J. Benton	c/o Am Apt Management Co, Inc. 708 South Gay Street, Suite 200 Knoxville, Tennessee 37902
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	D	Mary Ann Morris	c/o Am Apt Management Co, Inc. 708 South Gay Street, Suite 200 Knoxville, Tennessee 37902

6/5/2014 11:27:41 From: To: 8506176380

( 6/8 )

7) ADD - D - Robert K. Trent c/o American Apartment Management Company, Inc.  
708 South Gay Street, Suite 200  
Knoxville, TN 37902

8) ADD - D - Sara Yoakley c/o American Apartment Management Company, Inc.  
708 South Gay Street, Suite 200  
Knoxville, TN 37902

**E. If amending or adding additional Articles, enter change(s) here:**  
**(Attach additional sheets, if necessary). (Be specific)**

See attached

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,**  
**provisions for implementing the amendment if not contained in the amendment itself:**  
**(if not applicable, indicate N/A)**

The date of each amendment(s) adoption: May 19, 2014, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

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

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(voting group)

☒ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated June 3, 2014

Signature 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Russell W. Fleming

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)