# N04000010437

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Na	me)
(Document Number)		
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
:		
		!

Office Use Only



500211702585

09/06/11--01015--024 \*\*35.00

11 SEP -6 PH 1:5

EBUILDIN OF CORPORATIONS

AN 1 8 1 1

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: SENIOR RI	3 SOURCE THOTITUTE
DOCUMENT NUMBER: 10 40000 10	437
The enclosed Articles of Amendment and fee are submitted for	filing.
Please return all correspondence concerning this matter to the fe	ollowing:
William HK (Name of Contact P	RAUTIBR III erson)
SBNIOR PRSOURCE (Firm/Company	ENSTITUTE DUC
345 34th Ana 1 (Address)	VE
STPETERSBURG (City/ State and Zip	6 Fl 33704
Bill address: (to be used for future	DR 6 e annual report notification)
For further information concerning this matter, please call:	
Bill KCAUTURE TIT at (Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to t	he Florida Department of State:
Certificate of Status Certifi (Addit	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

#### **Articles of Amendment** to

### Articles of Incorporation of

SELVOR KE	SOURC	RI	RS72	TUTE	IN
(Name of Corporation as cur	rently filed with t	he Florida l	Dept. of Sta	ite) /	
NO 40000 10	437_				
(Document Nu	mber of Corporati	on (if known	1)		
Pursuant to the provisions of section 617.1006 the following amendment(s) to its Articles of I		this <i>Florida</i>	Not For P	rofit Corporat	ion adopts
A. If amending name, enter the new name	of the corporation	<u>1:</u>			
The new name must be distinguishable and abbreviation "Corp." or "Inc." "Company"				orporated" or	the
B. Enter new principal office address, if ap (Principal office address MUST BE A STRE		<u> </u>			
C. Enter new mailing address, if applicable	۵۰				
(Mailing address MAY BE A POST OFF)					
		<del></del>			9-6-6-18-18-18-18-18-18-18-18-18-18-18-18-18-
				·—	PA CREE
D. If amending the registered agent and/or	registered office :	address in F	lorida, ent	er the name o	The ≥E
new registered agent and/or the new reg					<b>6</b> 8
Name of New Registered Agent:				<u>.                                    </u>	
New Registered Office Address:	(Florid	la street add	ress)	<del></del>	
				_, Florida	
		(City)		(Zip Code	?)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered	ng Registered Ag d agent. I am f	<mark>ent:</mark> amiliar with	and accep	et the obligation	ons of the
position.	- "		•	Ü	-
	Signature of New I	Registered A	gent, if cha	nging	

## 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)

<u>Title</u>	Name	<u>Address</u>	Type of Action
SEC	Name OTAJAZO	TOUR 644	Chaples Covet Sour
	. /	= Dob	Remove
		> YETE F	(3370/
			Remove
		· -	☐ Add
E. <u>If amend</u> (a <i>ttach ad</i>	ing or adding additional Article ditional sheets, if necessary).	es, enter change(s) here: (Re specific)	
(======================================		zo specytoj	
<del> </del>			
<del> </del>		· · · · · · · · · · · · · · · · · · ·	
	<u> </u>		

The date of each amendment(s) ad-	option: 8/2/20//
700 41 14 15	(dute of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopwas/were sufficient for approval.	pted by the members and the number of votes cast for the amendment(s)
There are no members or members adopted by the board of directors	ers entitled to vote on the amendment(s). The amendment(s) was/were
DatedSignature	2/2011 Mm Krowke 11
ABy the ch	nairman or vice chairman of the board, president or other officer-if directors
	been selected, by an incorporator – if in the hands of a receiver, trustee, or t appointed fiduciary by that fiduciary)
<u>U</u>	(Typed or printed name of person signing)
<u> </u>	(Title of person signing)
	(Tide of person signing)