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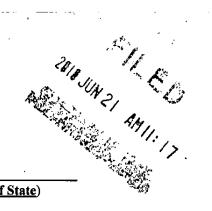
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NAME OF CORPORATION:	103940/EXTEN	ded Family CARe Home INC
DOCUMENT NUMBER: 105000003	940	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
LUNENIA AlleN (Name of	Contact Person)	
Extended Family		16
641 Ridgewood	Street Address)	
Altamonte Spur (Chy/ State	ic and zip code)	
LUVENIGA LEN CON E-mail address: (to be use	AST. NET d for future annual report notific	cation)
For further information concerning this matter, please	e call:	
(Name of Contact Person)	at (<u>954</u>) <u>232</u> (Area Code & Dayt	-6362 ime Telephone Number)
Enclosed is a check for the following amount made p	ayable to the Florida Departmen	nt of State:
\$35 Filing Fee \$\sum \$	□ \$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	Street Address Amendment Section	
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Division of Corporati Clifton Building 2661 Executive Cente	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Extended 7Am	ilu CARe	Home	INC	· :	
(Name of Cor	<u>ooration as curi</u>	rently filed v	vith the Florida	Dept. of St	ate)
N050	000039	40			
	(Document Nu	mber of Cor	oration (if know	wn)	

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

iter new principal office address, if		4631 N'W 74	th Ave
cipal office address <u>MUST BE A STR</u>	REET ADDRESS)	4631 N'W 74 Lauderhill,	7/33319
		:	
nter new mailing address, if applica failing address <u>MAY BE A POST OF</u>		4631NW74th	Ave
-		463/NW 74th	33/9
		,	•
amending the registered agent and/	or registered office	e address in Florida, ente	r the name of the
amending the registered agent and/ w registered agent and/or the new r			r the name of the
			r the name of the
w registered agent and/or the new r			r the name of the
w registered agent and/or the new r	egistered office ad		r the name of the
w registered agent and/or the new r	egistered office ad	dress:	r the name of the

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>	<u>Name</u>	Address	Type of Action
<u></u>	DANEN Garland	4631 NW 74 thave Lauderhill, 4, 33319	Add Remove
<u>S</u>	Pearl Bunges	4046 NW 19th St Blant Out 410 Zan dechull, 713331	Add Remove
·	· · · · · · · · · · · · · · · · · · ·		☐ Add ☐ Remove
(anach ad	Ing or adding additional Articles, enter ditional sheets, if necessary). (Be specified)	fic)	
medi t	cal care to the se	ich, Spintual & having the Goss	homeless? ncouragement rel of
Jesus	Christ worldwis	e.	
	- Manada		
·		•	······································
	· · · · · · · · · · · · · · · · · · ·	<u>;</u>	····
	***************************************	<u> </u>	<u> </u>

The date of each amendment(s) adoption: <i>() / / //</i>	0	
Effective date <u>if applicable</u> :	6/17/10	option is required)	
	(no more than 90 days	after amendment file date)	
		•	
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were was/were sufficient for appro	e adopted by the members and oval.	the number of votes cast for th	e amendment(s)
There are no members or m adopted by the board of dire	embers entitled to vote on the actors.	amendment(s). The amendmen	nt(s) was/were
		· :	
Dated_6/17	://0	<u> </u>	
Signature	Perenia allen		
have	the chairman or vice chairman or not been selected, by an incorrection court appointed fiduciary by t	rporator – if in the hands of a	
*	Luvenia Alk	name of person signing)	
	Director		
	(Title of per	son signing)	

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