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(—) (md) May 13 2014

R. While

COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: TENDER MERLY GROUP HOME, Inc.
DOCUMENT NUMBER: MO6000010989
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Thelma Bradley
(Name of Contact Person)
Tender Menu Brown Home, Inc.
(Firm/Company)
2927 PALASTIO WAY
(Address)
Delee 172 34761
(City/ State and Zip Code)
The Int Bety " 123 million 120
For further information concerning this matter, please call:
The Ima Bundley at (386) 984-2866 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) / (Area Code & Daytine Pelephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\bigcup \\$43.75 Filing Fee \$\bigcup \\$43.75 Filing Fee \$\bigcup \\$52.50 Filing Fee \$\bigcup \\$64 Certificate of Status \$\bigcup \\$64 Certified Copy \$\bigcup \\$64 Certif
Mailing Address Street Address
Amendment Section Amendment Section Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building
Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

		FILED 14 APR 30 PH 4: 03 CONTINUE OF CTATE TALLAHASSEE, FLORIDA
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corpo	ration adopts the following
A. If amending name, enter the new name of the corporat	tion:	
name must be distinguishable and contain the word "corpord "Company" or "Co." may not be used in the name.	ntion" or "incorporated" or the abbre	The new viation "Corp." or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2727 PAIA. DILLE JEL 3	<u>5 treo Wing</u> 4 761
D. If amending the registered agent and/or registered office and/or the new registered office a		e of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida _	
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fa		of the position.

Page 1 of 4

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: X Change X Remove X Add	PT John Doe V Mike Jones SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change Add Remove	V LORENTO Jones	6302 Mastlewood Lav Dr. 1901 Of FL 32818
2) Change Add	V DR. Gregory LSR How thomas	P.O. Box 308 Dundre FC
Remove 3)Change	9 De Janie Jones	6302 CASTIPWOOD LNI Delandoj FL
Remove 4) Change Add Remove	3 Gloria ILOMY	903 Avenue A Haines litel, Fl 338 44
5) Change Add Remove	T LORNE Bell	2727 PATASTILO WAY DETANDO JEC 34761
6) Change Add Remove		

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
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date this document was signed.	loption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac was/were sufficient for approva	dopted by the members and the number of votes cast for the amendment(s) al.	
There are no members or members adopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were ors.	
Dated	28/14	
Signature The	lmu Sud Cay	
have not be	man or vice chairman of the board, president or other officer-if directors en selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
The	Ima Bradley	
Prei	(Typed or printed name of person signing)	
	(Title of person signing)	