N070000007912

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	isiness Entity Nai	me)
(Do	cument Number))
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SECRETARY OF STATE
DIVISION OF CORPGEALION

JUN 21 2016 C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DHAILS COMMU	INITY ENHANCEMENT	SERVICES, INC.
DOCUMENT NUME	N0700007912		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Julia Greenberg-Aguilar		
		Name of Contact Person	n
	MyUSAcorporation.com		
		Firm/ Company	
	1 Radisson Plaza, Suite 800		
	A CONTRACTOR OF THE CONTRACTOR	Address	
	New Rochelle, NY 10801-57	69	
		City/ State and Zip Cod	e
	F-mail address: (to be us	ed for future annual report	notification)
	L man address, (to be as	ou for future unitidal report	nottricution
For further information	concerning this matter, pleas	e call:	
Julia Greenberg-Agui	lar	at (<u>877</u>	330-2677
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	artment 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)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301



June 1, 2016

JULIA GREENBERG-AGUILAR / MYUSACORPORATION.COM 1 RADISSON PLAZA SUITE 800 NEW ROCHELLE, NY 10801-5769 US

SUBJECT: DHAILS COMMUNITY ENHANCEMENT SERVICES, INC.

Ref. Number: N07000007912

We have received your document for DHAILS COMMUNITY ENHANCEMENT SERVICES, INC. and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to profit statutes (chapter 607, Florida Statutes). As the entity was originally filed as a nonprofit corporation, this document should be filed pursuant to chapter 617, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

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

Letter Number: 416A00011441

Carolyn Lewis
Regulatory Specialist II

www.sunbiz.org

Articles of Amendment to Articles of Incorporation of

FILEU SECRETARY OF STATE DIVISION OF CORPORATION

2016 JUN 15 PM 2: 09

DHAILS COMMUNITY ENHANCEMENT SERVICES, INC.

(Name of Corporation	as current	tly filed with the Florida	Dept. of State)	
N07000007912				
(Docur	nent Numbe	er of Corporation (if know	vn)	
Pursuant to the provisions of section 617.1006, Flo amendment(s) to its Articles of Incorporation:	rida Statute	s, this <i>Florida Not For F</i>	Profit Corporation adopts the following	
A. If amending name, enter the new name of the	e corporati	on:		
HAILS PLACE INC.			The new	
name must be distinguishable and contain the word "Company" or "Co." may not be used in the nam		ion" or "incorporated" (
B. Enter new principal office address, if applicable:		9280 NUGENT TRAIL		
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)	WEST PALM BEACH, FL 33411		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		9280 NUGENT TRAIL		
		WEST PALM BEACH, FL 33411		
D. If amending the registered agent and/or reginew registered agent and/or the new register			ter the name of the	
	LARRY I			
Name of New Registered Agent:		GENT TRAIL		
	•		da street address)	
<u>New Registered Office Address:</u>				
	WEST PA	LM BEACH	, Florida	
		(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen			e obligations of the position.	
		1///	W	
_	Si	gnature of New Registere	ed 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	<u>V</u> <u>Mil</u>	n <u>Doe</u> ke <u>Jones</u> ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	coo	Larry Hails	9280 Nugent Trail
Add			West Palm Beach, FL 33411
Remove			
2) Change	·		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	<u> </u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)					
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	date of each amendment(s) adopt	tion:	FILEO	_, if other than the
date	this document was signed.		FILED SECRETARY OF STATE DIVISION OF CORPORATION	
Effe	ective date <u>if applicable</u> :	(no more than 90 days after a	mendment fild Sate UN 15 PM 2:09	
	e: If the date inserted in this block ument's effective date on the Depart	does not meet the applicable statu	ntory filing requirements, this date will not	
Ado	option of Amendment(s)	(<u>CHECK ONE</u>)		
	The amendment(s) was/were adopt was/were sufficient for approval.	ted by the members and the numb	er of votes cast for the amendment(s)	
	There are no members or members adopted by the board of directors.		nt(s). The amendment(s) was/were	
	Dated <u>5-10-1</u>	<u>.</u>		
	Signature(By the chairma	n or vice chairman of the board, r	president or other officer-if directors	_
	have not been s		the hands of a receiver, trustee, or	
	Lar	-y Hails 5		
		(Typed or printed nan	ne of person signing)	
		C	00	
		(Title of p	erson signing)	