## N07000008514

(Re	questor's Name)	
(Ad	dress)	<del>.</del>
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(Cit	y/State/Zip/Phone	<b>⇒#</b> )
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
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12/06/11--01034--006 \*\*43.75

Amend Tbrown 12-7-11

## **COVER LETTER**

TO: Amendment Section Division of Corporations Good Growth Homes, Inc. N07000008514 DOCUMENT NUMBER: # The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Middle River Drive Suite #311
(Address) Lauderdale, F1. 33304 (City/State and Zip Code) Good Growth Homes inc a Hotmail.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 954 ) 793-2123 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & **□**\$43.75 Filing Fee & □\$52.50 Filing Fee □ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

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TALLAHASSE	YOF STATE

Articles of Amendment
Articles of Amendment to Articles of Incorporation of  Good Growth Homes, Inc- (Name of Corporation as currently filed with the Florida Dept. of State)
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(Name of Corporation as currently filed with the Florida Dept. of State)
# NO700008514  (Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.  B. Enter new principal office address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Ft. Lauderdale, Fl. 33304
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  915 Middle River Drive Suite #311  Ft. Lauderdale, F1. 33304
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: Darlyce Wilson Edwards
Name of New Registered Agent:  915 Middle River Drive Suite # 311  (Florida street address)  New Registered Office Address:  Ft. Landerdale, Florida 33304  (City) (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.

Signature of New Registered Agent, if changing

Page 1 of 4

## If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet.)

Title(s)		<u>Name</u>		Address	
1) <u>DT</u>		Darlyce Wilson E	dwads.	715 N.W. 47th Terrace Plantation, Fl. 33317	e
2) <u>DP</u>		Robert L. Jack	<u>30</u> n	915 Middle River Drive 7 Ft. Lauderdale, Fl. 333	#31
3)			<del>-</del> .		
4)			·		
5)			·		
6)			<del></del> .		
If REMOVING	an office	r and/or director, please list the	title(s) and	name of the officer/director to be removed:	
Title(s)	<u>Name</u>		Title(s)	<u>Name</u>	
1) DC	Jac	kson, Erica	4)		
2) DT	Jac	kson, Erica kson, Erin	5)		
2)		·	•		

E. If amending or adding ad (attach additional sheets, if	ditional Articles, en necessary). (Be s	nter change(s) he pecific)	<u>re</u> :	
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The	date of each amendment(s) adoption: 12-1-11
Effe	ctive date if applicable: 12-10-11 (no more than 90 days after amendment file date)
Ado	option of Amendment(s) ( <u>CHECK ONE</u> )
<b>⊠</b> ′	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
	Dated 12-1-1/
	Signature Signature
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
	Robert L. Jackson
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)

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