N08000000497

| (Requestor's Name) | | | |
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| (City/State/Zip/Phone #) | | | |
| PICK-UP WAIT MAIL | | | |
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| (Business Entity Name) | | | |
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| (Document Number) | | | |
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| Certified Copies Certificates of Status | | | |
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| Special Instructions to Filing Officer: | | | |
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SECRETARY OF STATE
SALL AHASSEE, FLORIO

Appendment 12/19/08 De

BORDELON, SCHULTZ & GREENE Attorneys at Law

Est 1974

John S. Bordelon, L.L.M.

Also admitted in Louisiana jbordelon@lawbordelon.com

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kaschultz(a)lawbordelon.com

Shari Thieman Greene

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December 15, 2008

VIA REGULAR U.S. MAIL

Florida Department of State Amendment Section P.O. Box 6327 Tallahassee, FL 32314

Re: C. Toler Enterprizes, Inc.

To Whom It May Concern:

Please find the enclosed Articles of Amendment for the above-referenced entity. Also, please find a check for \$35.00 for the filing fee.

If there are any questions or concerns please do not hesitate to contact our office.

Sincerely,

Bordelon, Schultz & Greene, P.L.

Selina M. Bryant

Paralegal to

Kerry Anne Schultz, Esquire

/smb **Enclosure**

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORI | PORATION: C. Toler Ent | erprizes, Inc. | *************************************** |
|-----------------------------------|--|--|--|
| DOCUMENT NU | MBER: <u>N08000000497</u> | | 5 |
| The enclosed Artic | les of Amendment and fee a | are submitted for filing. | |
| Please return all co | rrespondence concerning th | is matter to the following: | |
| Seli | na M. Bryant | | |
| | (Name | of Contact Person) | |
| <u>C. T</u> | oler Enterprizes, Inc. | | |
| | (Fi | rnı/ Company) | |
| <u>171</u> | Carrier Drive | | |
| | | (Address) | |
| Pen | sacola, FL 32506 | | |
| | • | tate and Zip Code) | |
| For further informa | tion concerning this matter, | please call: | |
| Selina M. Bryant | | at (<u>850</u>) <u>529 120</u> | |
| (Name of Contact Person) | | (Area Code & Daytime Telephone Number) | |
| Enclosed is a check | for the following amount n | nade payable to the Florida De | partment of State: |
| ∑ \$35 Filing Fee | \$43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mailing Address Amendment Section | | Street Address Amendment Section | |
| Division of Corporations | | Division of Corporations | |
| P.O. Box 6327 | | Clifton Building | |
| Tallahassee, FL 32314 | | 2661 Executive Center C Tallahassee, FL 32301 | ircle |

Articles of Amendment to Articles of Incorporation of

| C. Toler Enterp | orizes, Inc. |
|---|--|
| (ingine of Corporation as currently fried w | thi the Piorida Den. of State) |
| N08000000497 (Document Number of Corp | poration (if known) |
| Pursuant to the provisions of section 617.1006, Florida Stat the following amendment(s) to its Articles of Incorporation | |
| A. If amending name, enter the new name of the corpor | ation; |
| The new name must be distinguishable and contain the wabbreviation "Corp." or "Inc." "Company" or "Co." may | |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES | <u>s</u>) |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | DECRETARY OF LEIGHASSEF. |
| | F STATE |
| D. If amending the registered agent and/or registered onew registered agent and/or the new registered office | ffice address in Florida, enter the name of the e address; |
| Name of New Registered Agent: | |
| New Registered Office Address: (a | Florida street address) |
| <u></u> | , Florida (City) (Zip Code) |
| New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I position. | ed Agent: am familiar with and accept the obligations of the |
| 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) **Title** Name Address Type of Action ☐ Add ☐ Remove ☐ Add ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets; if necessary). (Be specific) Article 3 is hereby amended to read as follows: A public charity, for such purposes, the making of distributions to organizations that qualify as exempt organizations under section 501(c)(3) of the Internal Revenue Code, or the corresponding section of any future federal tax code, which exists to develop and maintain living facilities for the elderly over the age of

| The date of each amendment | t(s) adoption: <u>12-2-08</u> |
|---|---|
| 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/we was/were sufficient for app | ere adopted by the members and the number of votes cast for the amendment(s) proval. |
| There are no members or adopted by the board of di | members entitled to vote on the amendment(s). The amendment(s) was/were rectors. |
| Dated 12-2 | 2-08 |
| hav | the chairman or vice chairman of the board, president or other officer-if directors or not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary) |
| | Selina M Bryant |
| | (Typed or printed name of person signing) |
| | Director Secretary |

Page 3 of 3