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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: V+E Residential Housing, INC.

DOCUMENT NUMBER: NO 8000000579

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Virgilee McAllister
(Name of Contact Person)

V+E Residential Housing, INC.
(Firm/ Company)

13840-77th Place North
(Address)

West Palm Beach, FL 33412
(City/ State and Zip Code)

For further information concerning this matter, please call:

Virgilee McAllister at (561) 333-9614
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

N+E Residential Housing, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

NO8000000579

(Document Number of Corporation (if known))

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:

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**)

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

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:

Virgilee McAllister

New Registered Office Address:

13840-77th Place North

(Florida street address)

West Palm Beach, Florida 33412

(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.

Virgilee McAllister

Signature of New Registered Agent, if changing

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ALLAHAMMA, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
<u>VP</u>	<u>Lester, Elizabeth</u>	<u>13840-77th PL N</u> <u>West Palm Beach</u> <u>33412</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Off</u>	<u>Gully, Arthur</u>	<u>2090 Drew St</u> <u>Apt. 214</u> <u>Clearwater, FL 31759</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Off</u>	<u>Lester, James</u>	<u>1659 40th St.</u> <u>West Palm Beach</u> <u>FL 33407</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Atty</u>	<u>Hakim, Pam E. Booker</u>	<u>121 S. W. Port St. Lucie Blvd</u> <u>Port St. Lucie, FL 34984</u> <u>5099</u>	<input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

The date of each amendment(s) adoption: Jan. 9, 2009

Effective date if applicable: Jan. 9, 2009
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

☒ 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 Jan. 9, 2009

Signature Caselyn Kennedy Orr
(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)

Virgilee McAllister
(Typed or printed name of person signing)

Virgilee McAllister
(Title of person signing)