N0800000000003

| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (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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Office Use Only



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COVER LETTER

| TO: Amendment Section Division of Corporations | | , | |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------|----------------------------------------------------------------------------------------|--|
| | illage, Inc. | | |
| NAME OF CORPORATION: | | | |
| N08000000 | 603 | | |
| DOCUMENT NUMBER: | | · · · · · · · · · · · · · · · · · · · | |
| The enclosed Articles of Amendment and fee are subm | nitted for filing. | | |
| Please return all correspondence concerning this matter | to the following: | | |
| Thomas Scott Campbell | | | |
| | (Name of Contact Person |) | |
| Ivanhoe Village, Inc. | | | |
| | (Firm/ Company) | | |
| 1605 Alden Rd | | | |
| | (Address) | | |
| Orlando, FL 32803 | | | |
| | (City/ State and Zip Code |) | |
| info@ivanhoevilla | ge.org | | |
| E-mail address: (to be used | for future annual report r | otification) | |
| For further information concerning this matter, please of | call: | | |
| Thomas Scott Campbell | at (407 | 203-2826 | |
| (Name of Contact Person) | (Area Co | de & Daytime Telephone Number) | |
| Enclosed is a check for the following amount made page | yable to the Florida Depa | rtment of State: | |
| \$35 Filing Fee \$\bigcup \text{\$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) | |
| Mailing Address Amendment Section | | | |
| Division of Corporations | Amendment Section Division of Corporations | | |
| P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle | | |
| · ···································· | | ssee, FL 32301 | |



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 7, 2012

THOMAS SCOTT CAMPBELL IVANHOE VILLAGE, INC. 1605 ALDEN ROAD ORLANDO, FL 32803

SUBJECT: IVANHOE VILLAGE, INC.

Ref. Number: N08000000603

We have received your document for IVANHOE VILLAGE, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Sylvia Gilbert Regulatory Specialist II

Letter Number: 012A00027107



| | | | | · . |
|-------------------------------------------------------------------------------------------------------------------|---------------------------------------|-------------------------------------------------------|---------------------------------------|----------------------|
| (Name of Corporation as currently | Articles VAAI Ho filed with the Flo | 0000603 | · · · · · · · · · · · · · · · · · · · | MECALIAN ANY PH 1:30 |
| Pursuant to the provisions of section 617.10 amendment(s) to its Articles of Incorporation | | es, this Florida Not For Profit Corp | poration adopts the | following |
| A. If amending name, enter the new nam | e of the corporati | on: | | |
| | | | · | _The new |
| name must be distinguishable and contain to "Company" or "Co." may not be used in the | he name. | ion" or "incorporated" or the abb Ivanhoe Village, | _ | or "Inc." |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | | 1605 Alden Rd | | - |
| | | Orlando, FL 328 | 03 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | Ivanhoe Village, | Inc. | - |
| | | 1605 Alden Rd. | | _ |
| | | Orlando, FL 328 | 803 | _ |
| D. If amending the registered agent and/ new registered agent and/or the new | registered office a | ddress: | ame of the | |
| Name of New Kegmerea Agent. | | ott Campbell | | |
| - | 1605 Alde | en Rd. (Florida street address) | _ | |
| New Registered Office Address: | | (rioriaa sireet address) | | |
| Ġ | Orlando (City) | | ia 32803 Code) | |
| New Registered Agent's Signature, if cha I hereby accept the appointment as register | ed agent. I fin fa | nitiar with and accept the obligation | ons of the position. | |
| Signe | atur e of New Regis | fered Agent, if changing | | |

Page 1 of 4

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>Mik</u> | n <u>Doe</u> re <u>Jones</u> y Smith | |
|----------------------------------|---------------------|--------------------------------------------|-------------------------------------|
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change | PD | Jane Webster | 1611-A Alden Rd. |
| Add | | | Orlando, FL 32803 |
| Remove | Т | Kelly Mora | 1611-A Alden Rd. |
| 2) Change | <u> </u> | Kelly Mora | |
| Add Remove | | | Orlando, FL 32803 |
| 3) Change | VP | Richard Bryan | 1611-A Alden Rd. |
| Add | | | Orlando, FL 32803 |
| X Remove | | | |
| 4) Change | PD | Patrick J. Allen | 1605 Alden Rd. |
| X Add | | | Orlando, FL 32803 |
| Remove | | () | |
| 5) Change | | Wallen Burris | 1605 Alden Rd. Orlando, FL 32803 |
| _X_ Add | | | Orlando, FL 32803 |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | • | |

| If amending or adding additional Arti (attach additional sheets, if necessary). | (Be specific) |
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| The date of each amendment(s) adoption: | | | | |
|-----------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|
| Effe | ective date if applicable: | | | |
| | (no more than 90 days after amendment file date) | | | |
| Ada | option of Amendment(s) (CHECK ONE) | | | |
| Ø | 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 11/20/12 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) | | | |
| | Patrick J Allen | | | |
| | (Typed or printed name of person signing) | | | |
| | President | | | |
| | (Title of person signing) | | | |