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| TO: Amendment Section Division of Corporation | าร | | | | 8 |
| NAME OF CORPORATION | Tallahassee Housing | Economic Corporati | on | | ON SAID S |
| DOCUMENT NUMBER: | N08000000686 | | | | بن. م |
| The enclosed Articles of Am | | | | | |
| Please return all corresponde | ence concerning this matte | r to the following: | | | |
| Brenda Williams | | | | | |
| | | (Name of Contact Pe | erson) | | |
| Tallahassee Housing Econo | mic Corporation | | | | |
| | | (Firm/ Company | ·) | | |
| 2940 Grady Road | | | | | |
| | | (Address) | | | |
| Tallahassee, FL 32312 | | | | | |
| , <u> </u> | | (City/ State and Zip | Code) | | |
| brenda@tallha.org | | | | | |
| Е | -mail address: (to be used | for future annual rep | ort notification | | |
| For further information conc | erning this matter, please | call: | | | |
| Brenda Williams | | at | 850 | 385-6126 | |
| | (Name of Contact Person) | | (Area Code) | (Daytime Telephone Number | ·) |
| Enclosed is a check for the f | ollowing amount made pay | vable to the Florida I | Department of S | State: | |
| ☐ \$35 Filing Fee | ☐S43.75 Filing Fee & Certificate of Status | S43.75 Filing Fee Certified Copy (Additional copy i enclosed) | Certifi s Certifi |) Filing Fee cate of Status ed Copy ional Copy is sed) | |

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

| Arti | cles of Incorporation of | Corportation & Corportation |
|--|-------------------------------|---|
| Tallahassee Housi (Name of Corporation as cur | ng Economic | Corportation & |
| (Name of Corporation as cur | rently filed with the F | lorida Dept. of State) |
| N 08 000000 686 | 6 | |
| (Document Nu | imber of Corporation (i | f known) |
| Pursuant to the provisions of section 617.1006, Florida Sta mendment(s) to its Articles of Incorporation: | tutes, this Florida Not | For Profit Corporation adopts the followin |
| a. If amending name, enter the new name of the corpo | ration: | |
| | | The nev |
| name must be distinguishable and contain the word "corporate to the corporate to the corpor | oration" or "incorport | ated" or the abbreviation "Corp." or "Inc." |
| Company" or "Co." may not be used in the name. | | |
| 3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE. | CC) | *** |
| Principal office address <u>brost be A STREET ADDRE</u> | <u></u> | |
| | | |
| | | |
| 2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | |
| inding marca present the state of the state | | |
| | | |
| | | |
|). If amending the registered agent and/or registered | office address in <u>Flor</u> | ida, enter the na <u>me of the</u> |
| new registered agent and/or the new registered offi | | |
| Name of New Registered Agent: | | |
| | | |
| | | (Florida street address) |
| <u>New Registered Office Address:</u> | | |
| | | , Florida |
| | (City) | (Zip Code) |
| New Registered Agent's Signature, if changing Registe | red Agent: | |
| hereby accept the appointment as registered agent. I at | n familiar with and acc | cept the obligations of the position. |
| | | |
| | Signature of New R. | egistered Agent, if changing |
| | organia of near ne | Smer on righting A comments |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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>Mi</u> | nn <u>Doe</u> ke Jones ly Smith | |
|----------------------------------|--------------------|---------------------------------------|------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | D | Dawson, Candice | 3286Woodbriar Lane |
| Add | | | Tallahassee, FL 32303 |
| X Remove | | | |
| 2) Change | D | Pratt, Kenneth | 150Parkbrook Circle |
| Add | | | Tallahassee, FL 32301 |
| X Remove | | | |
| 3) X Change | D | Kelly, Walter | 824 Barrie Avenue |
| Add | | | Tallahassee, FL 32303 |
| Remove | | | |
| 4) X Change | D | Jones, Kendall | 7850 Preservation Road |
| Add | | | Tallahassee, FL 32312 |
| Remove | | | |
| 5) X Change | D | McAllister, Julius | P.O. Box 6442 |
| Add | | | Tallahassee, FL 32314 |
| Remove | | | |
| б) X Change | D/S | Williams, Brenda | 2940 Grady Road |
| Add | | | Tallahassee, FL 32312 |
| Remove | | | |

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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.

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| Example: X Change X Remove X Add | <u>V</u> <u>Mi</u> | nn <u>Doe</u> ke Jones ly Smith | |
|----------------------------------|--------------------|---------------------------------------|---------------------------------------|
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | D | Atkins, Courtney | 1420 Lee Ave. |
| X Add | | | Tallahassee, FL 32303 |
| 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 Art (attach additional sheets, if necessary). | (Be specific | :) | | | | | | |
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| The date of each amendment(s) adoption | n: | , if other than the |
|--|---|---------------------|
| date this document was signed. Effective date if applicable: | (no more than 90 days after amendment file date) | · · |
| Note: If the date inserted in this block doe document's effective date on the Department | es not meet the applicable statutory filing requirements, this date will no | ot be listed as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adopted was/were sufficient for approval. | by the members and the number of votes cast for the amendment(s) | |
| adopted by the board of directors. Dated Signature | Ititled to vote on the amendment(s). The amendment(s) was/were | |
| the control of the co | r vice chairman of the board, president or other officer-if directors eted, by an incorporator – if in the hands of a receiver, trustee, or | |
| | ted fiduciary by that fiduciary) | |
| Brenda Willian | as Brenda Williams | |
| | (Typed or printed name of person signing) | |
| Director/Secret | ary | |
| | (Title of person signing) | |