## N08000008375

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SECRETARY OF STATE
ALLAHASSEE, FI ORIO,

Amenal 5-11-09

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	ON: <u>URBAN HO</u>	ME SOLUTIONS, INC.	
DOCUMENT NUMBER:	N08000008375		
The enclosed Articles of Am	nendment and fee	are submitted for filing.	
Please return all corresponde	ence concerning th	is matter to the following:	
Frances H. C			1-20
	(Name	of Contact Person)	
<u>Urban Home</u>	Solutions, Inc.		
	(Fi	irm/ Company)	
3943 Leane	Drive	(Address)	
		(Address)	
Tallahassee	Florida 32309	State and Zip Code)	
For further information conc		•	
Frances Campbell		at ( 850) 893-6	332
(Name of Contact	Person)	(Area Code & Dayti	me Telephone Number)
Enclosed is a check for the f	ollowing amount i	made payable to the Florida D	epartment of State:
	75 Filing Fee & ifficate 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		Street Address Amendment Section	
Division of Corporat	ions	Division of Corporation	ns
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314 2661 Executive Center Circle		Circle	

Tallahassee, FL 32301

## **Articles of Amendment** to **Articles of Incorporation** of

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pt. of State)	`0876 <sub>4</sub> -	<b>3</b>
	,	_

URBAN HOME SOLUTIONS, INC (Name of Corporation as currently filed with the Florida Der N08000008375 (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: New Registered Office Address: (Florida street address) , Florida\_ (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

## 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>	Name	<u>Address</u>	Type of Action
<u>Chair</u>	Frances Campbell		☑ Add ☐ Remove
<u>Dir.</u>	Lisa Pasquarelli		Add Remove
<u>Dir.</u>	Kimberly Wilkerson		Add Remove
(attach addit	y or adding additional Articles, enter clional sheets, if necessary). (Be specific PURPOSE of Urban Home Solutions, Inc. is a	;)	se of lower
	dministering and providing services		
	nstruct housing of high quality for n		
	hose who receive the assistance of		
organizations	s to meet their housing needs. Ful	filling the purpose will have	the effect
of combating	community deterioration and conf	tribute to a higher quality of	ife for those
who receive	assistance.		
ARTICLE VI	, DISSOLUTION		
Upon the dis	solution of this corporation, assets	shall be distributed for one	or more
exempt purp	poses within the meaning of Section	n 501(c)3 of the Internal Re	venue
Code of 195	4, or corresponding section of any	future Federal tax code, or a	ahll
be distribute	d to the Federal government, or to	a state or local government	for a
public purpos	se		

The date of each amendment(s) adoption: April 29, 2009		
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 dis	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.	
Dated_Apri	il 29, 2009	
Signature	Frances H Campbell	
hav	the chairman or vice chairman of the board, president or other officer-if directors to not been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)	
	Frances H. Campbell	
	(Typed or printed name of person signing)	
	Chair of the Board and President	
	(Title of person signing)	