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Amend

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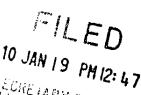
TO: Amendment Section

Division of Corporations MOODOOODSOT **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (SUI) 955-4802 (Area Code & Daytime Telephone Number) Enclosed is a check for the following amount made payable to the Florida Department of State: □\$35 Filing Fee **☑** \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Street Address Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation



•	of	δέζας
BOCACALE FAC	٠ -	TALLAHASSEE, FLORIC
	urrently filed with the Florid	la Dept. of State)
POODOOPON		,,
	Number of Corporation (if kno	own)
Pursuant to the provisions of section 617.10 the following amendment(s) to its Articles of	of Incorporation:	ida Not For Profit Corporation adopts
A. If amending name, enter the new nam	ie of the corporation:	
The new name must be distinguishable an abbreviation "Corp." or "Inc." <u>"Compan</u>		
B. Enter new principal office address, if (Principal office address MUST BE A STR		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
D. If amending the registered agent and/ new registered agent and/or the new		n Florida, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida street	address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if cha hereby accept the appointment as regist position.	nging Registered Agent: ered agent. I am familiar	with and accept the obligations of the
	Signature of Nov. Boxister	d taget if abouting
	Signature of New Registere	d Agent, if changing

Page 1 of 3

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
F <u>4</u>	FRANZTython.	800 MENDOUS ROND BOURLY, FL 33786	☑ Add □ Remove
<u></u>	Λ		☐ Add ☐ Remove
			☐ Add ☐ Remove
E. If amending (attach additi	or adding additional Articles, enter onal sheets, if necessary). (Be specif	change(s) here: fic)	
	,		
			,
		,	

	The date of each amendment(s) adoption: $1-5-2010$			
		(date of adoption is required)		
	Effective date if applicable:	(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(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.				
	Dad	1/5/2017		
	Dated			
	Signature	4		
	have	the chairman or vice chairman of the board, president or other officer-if directors a not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)		
		JAnna 7. King (Typed or printed name of person signing)		
		SETELAN AND VICE THESIDENT (Title of person signing)		