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PICK-UP	WAIT	MAIL
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(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	Certificates	s of Status.
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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amund 21/09

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ration: <u>CPCVOHI</u>	on Community	y Restore,
DOCUMENT NUM	BER: N09000007801		
The enclosed Articles	s of Amendment and fee are sub	omitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
		i A. Stepps	
	(Name of	Contact Person)	
	Operation Cor	nmunity Restore, Inc.	· · · · · · · · · · · · · · · · · · ·
	(Firm	n/ Company)	
	24 Cot	tage Avenue	
	(,	Address)	
	Jackson	ville, FL 32206	
	(City/ Sta	te and Zip Code)	
	ladi@operation E-mail address: (to be use	communityrestore.org	cation)
For further information	on concerning this matter, pleas	e call:	
Ladi A. Stepps		at (904) 662-836	66
(Name	of Contact Person)		me Telephone Number)
Enclosed is a check for	or the following amount made p	payable to the Florida Departmen	nt of State:
☑\$35 Filing Fee	☐ \$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		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporati Clifton Building	ons
Tallahassee, FL 32314		2661 Executive Center Tallahassee, FL 3230	

Articles of Amendment to Articles of Incorporation of

Operation Community Restore, Inc.				
(Name of Corporation as currently filed with	the Florida Dept. of State)			
N0900007801				
(Document Number of Corporat	ion (if known)			
Pursuant to the provisions of section 617.1006, Florida Statutes the following amendment(s) to its Articles of Incorporation:	, this <i>Florida Not For Profit C</i>	orporation adopts		
A. If amending name, enter the new name of the corporation	<u>n:</u>			
The new name must be distinguishable and contain the word abbreviation "Corp." or "Inc." "Company" or "Co." may not		ted" or the		
B. Enter new principal office address, if applicable:	24 Cottage Avenue			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Jacksonville, FL 32206			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1457 North Mangonia Circle			
	West Palm Beach, FL 33	401		
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade Name of New Registered Agent:		name of the		
New Registered Office Address: (Flor	ida street address)			
	(City), Flor	rida Zip Code)		
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am position.		obligations of the		

Page 1 of 3

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>	<u>Name</u>	<u>Address</u>	Type of Action
ED	Ladi A. Stepps	24 Cottage Avenue Jacksonville, FL 32206	_
BM	Sherry H. Simmons	5850 Norwood Ave	_
			_
(attach add Article VIII- Upon disso exempt pur or the corre Federal gov	or adding additional Articles, enterprise of the specific or adding additional Articles, enterprise of the specific or addition of said corporation, assets a poses within the meaning of Section of any future from the specific or a state or local grouped of by a Court of competent	s shall be distributed for one	stributed to the
	ice is then located, exclusively for ns as said court shall determine,		
	is as said court shall determine,	which are organized and ope	rated exclu-
No part of t	he net earnings of this corporation	on shall insure to the benefit o	f, or be distribu-
table to, its	members, directors, officers, or	pay reasonable compensation	for services
rendered a	nd to make payments and distrib	outions in furtherance of the p	urposes set
forth in thes	se services.	e de la companya de l	
All referenc	es to sections of the Internal Re	venue Code shall include suc	h sections
as of the da	ate hereof and the corresponding	g section of any future federal	tax code.

The date of each amendmen	t(s) adoption: November 23, 2009
Effective date <u>if applicable</u> :	(date of adoption is required) Effective immediately
	(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 di	members entitled to vote on the amendment(s). The amendment(s) was/were rectors.
Dated_11/2	23/2009
Signature	Alalandra Hauh
(By	the chairman or vice chairman of the board, president or other officer-if directors to been selected, by an incorporator – if in the hands of a receiver, trustee, or er court appointed fiduciary by that fiduciary)
	Yhalondra March
	(Typed or printed name of person signing)
	Secretary, duly authorized by Board to execute
	(Title of person signing)

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