## 10000001164

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REPARIMENT OF STATE

VISION OF CORPORATION

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Golden Lifestyle Development Corp.				
DOCUMENT NUM	BER: N10000004264	RANGE OF STREET		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	of Amendment and fee are sul	omitted for filin	ng.	
Please return all corre	spondence concerning this mat	ter to the follow	wing:	
		riam Ruiz		
	(Name of	Contact Person	n)	
	Golden Lifesty	le Developmo	ent Corp.	
	(Firm	/ Company)	···········	<del></del>
	80	Day 6202		
		Box 6383 Address)		
	(1	ndui CSS)		
	Tallahasse	e, Florida 32	2314	
<del></del>	(City/Sta	te and Zip Code	e)	
	mrh06( E-mail address: (to be use	@yahoo.com		ation)
	·		raar report nonne	
For further information	n concerning this matter, please	e call:		
Miriam Ruiz		850	) 575-572	4
	of Contact Person)			ne Telephone Number)
·	r the following amount made p	•	•	
□\$35 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status	\$43.75 F Certified C (Additional enclosed)		☑ \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	g Address		eet Address	· · · · · · · · · · · · · · · · · ·
	lment Section		nendment Section	
	n of Corporations		vision of Corporatio	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

	A TOWN		Acres 1	E	D	
11-A	PR	_	5	PM	4: 1	ı

Oalder I Kashda Davida	4 0	" MIN -5 PM 4:
Golden Lifestyle Develop	ment Corp.	CONFRACY OF THE
Golden Lifestyle Develop  (Name of Corporation as currently filed with	h the Florida Dept. of Sta	WAHASSEE. FLOR
N1000004264	<del>}</del>	
(Document Number of Corpor	ation (if known)	
ursuant to the provisions of section 617.1006, Florida Statutone following amendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For Pr</i>	ofit Corporation adopt
. If amending name, enter the new name of the corporat	ion:	
he new name must be distinguishable and contain the wor bbreviation "Corp." or " Inc." <u>"Company" or "Co." may n</u>		rporated" or the
Enter new principal office address, if applicable:  Principal office address MUST BE A STREET ADDRESS		
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 6383	
	Tallahassee, FL 323	314
If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		er the name of the
Name of New Registered Agent:		_
New Registered Office Address: (Flo	rida street address)	<del>-</del> .
		_, Florida
	(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I amount in the control of the con		t the obligations of the
	w Registered Agent, if char	

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>	Address	Type of Action
<u> </u>	Hiram Hernandez	Cond.Vista de La Vega Apt 934 Vega Alta, Puerto Rico 00692	☑ Add ☐ Remove
<u>D</u>	Blanca Huertas	P.O. Box 653 Luquillo, Puerto Rico, 00	☑ Add ☐ Remove
Sec	Sylvia Fernandez	P.O. Box 6383 Tallahassee, Florida 32314	☑ Add □ Remove
	or adding additional Articles, enter clional sheets, if necessary). (Be specific		
Golden Lifes	tyle Development Corporation is o	rganized exclusively for char	itable,
religious, edu	cational, and scientific purposes,	including, for such purposes	, the making
of distribution	is to organizations that qualify as e	exempt organizations under	Section 501c3
of the Interna	Revenue code, or corresponding	section of any future tax cod	de. Upon
dissolution of	the organization, assets shall be	distributed for one or more e	xempt purpose
within the me	aning of section 501c3 of the Inter	rnal Revenue Code or distrib	uted to the
federal gover	nment, or to the state or local gove	ernment, for a public purpose	e. Any such
assets not dis	sposed of shall be disposed of by	the Court Pleas of the county	in which the
principal offic	e of the organization is then locate	ed, exclusively for such purpo	osed or to such
organization	or organizations as said Court sha	all determine, which are orga	nized and
operated exc	lusively for such purposes. The m	nission of Golden Lifestyle De	evelopment
Corporation i	s to provide inidependent living an	nd affordable housing to pers	ons 55 years o
age or older	and to low and moderate income for	amilies to enhance their lifes	tyle and quality
of life.			

## 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>	Address	Type of Action
Sec	Carolina Machin	4982 Branded Oaks Court Tallahassee, Florida 32311	☐ Add ☐ Remove
			☐ Add Remove
			✓ Add ☐ Remove
E. <u>If amendin</u> (attach addi	g or adding additional Articles, enter of tional sheets, if necessary). (Be specificational sheets)	change(s) here: c)	
-		7-	
		· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·			

The date of each amendmen	t(s) adoption: 3/31/11
Effective date <u>if applicable</u> :	(date of adoption is required)
	(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_3/31	I/11
Signature _	Miciana Brica
hav	y the chairman or vice chairman of the board, president or other officer-if directors we not been selected, by an incorporator — if in the hands of a receiver, trustee, of the court appointed fiduciary by that fiduciary)
	Miriam Ruiz
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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