## N1400000044669

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Amendia

MAR 7 2017 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: RUOM 2 BLOOM COMMUNITY BEVOLOPMENT, LNC
DOCUMENT NUMBER: N1400001669
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
EMOUNTE BANKS
(Name of Contact Person)
ROOM 2 BLOOM Community Devalopment, Towe.
(Firm/ Company)
13485 ALEXANDRIA DRIVE
(Address)
Opa-Locka, FL 33054-1826 (City/State and Zip Code)
(City/ State and Zip Code)
2. banks @ 200m 16100m cdc. ORg E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
JOREEN Stephens at (454) 649-0592
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\begin{array}{c} \$\begin{array}{c} \$43.75 Filing Fee & \begin{array}{c} \$\begin{array}{c} \$43.75 Filing Fee & \begin{array}{c} \$\begin{array}{c} \$\$\$ \$Certificate of Status & Certified Copy & Cer
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment

## Articles of Incorporation

	Articles of incorporation	<b>.</b> .
LOSM 2 BLOWN Communisty	Devalopment LNC	
(Name of Corporatio	on as currently filed with the Florida Dept. of State)	5
N140	000004669	
(Docu	ument Number of Corporation (if known)	,
Pursuant to the provisions of section 617.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, this Florida Not For Profit Corporation	adopts the following
A. If amending name, enter the new name of the	he corporation:	
	rd "corporation" or "incorporated" or the abbreviation	The new
"Company" or "Co." may not be used in the nan  B. Enter new principal office address, if applic (Principal office address MUST BE A STREET)	ne. Pable:	——————————————————————————————————————
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	EBOX) 13485 ALEXENDRIO Ups-Locks, Th 3	121VE 13054-1826
new registered agent and/or the new registe	FN binto Bonll 8	<u>he</u>
Name of New Registered Agent:	2721 NW 152 Nd PORK	1205
New Registered Office Address	(Florida street address)	
	Ops-Locks . Flori	da 33054
	(City) (Zi <sub>j</sub>	p Code)
New Registered Agent's Signature, if changing		
I hereby accept the appointment as registered age	ent. I am familiar with and accept the obligations of the	
	Signature of New Registered Agent, if chang	ing

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)

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	PT         John D           V         Mike J           SV         Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>CEO</u>	shella Dudlay	1910 NW 9544 STREET
Add		/	Mon1, 72 33147
Remove			
2) Change	CEO	EMUNTO BONKS	1791 NW 132 Nd TOMACE Apr -Locks, FU 33037
Add			Mrs -LOCKS, FD 33654
Remove 3) Change	V	Shalia Addlay	1910 NW 9344 Street Misni, FU 33147
X Add			Miani, FU 33147
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding addition (attach additional sheets, if necessity)	nal Articles, enter char ssary). (Be specific)	nge(s) here:		
	NA			
	<u> </u>			
			<u> </u>	
			.,, .	
			<del></del>	

` Fh	e date of each amendment(s) adoption: March L, 2017	, if other than the
	e this document was signed.	
Eff	(no more than 90 days after amendment file date)	·
	te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no nument's effective date on the Department of State's records.	t be listed as the
Ad	option of Amendment(s) (CHECK ONE)	
Ø	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
	adopted by the board of directors.	
	Dated March 2, 2017	
	Signature (Mar) Sul- CEO	
	(By the chairman or vice Mairman of the board, president or other officer-if directors have not been selected, by an incorporator — if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	EMOUNTE BUNKS	
	(Typed or printed name of person signing)	
	Cant. Bul.	

(Title of person signing)