## N14000011685

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(Ad	dress)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

**Division of Corporations** 

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION	City of Life	Jacksonville Inc.		
DOCUMENT NUMBER: _	N1400001	1685		
The enclosed Articles of Ame		t		
Please return all corresponden	ce concerning this matter	to the following:		
	]	Deborah Alexa		
	(	(Name of Contact P	Person)	
	Simonic, Simonic,	Ratnecht & Assoid	cates, CPA, Inc.	
	····	(Firm/ Compan	y)	
	875	60 Perimeter Park B	lvd	
		(Address)		
	Jac	eksonville, FL 322	116	
***	(	City/ State and Zip	Code)	<del></del> .
		debbie@simonic	net	
E-1	nail address: (to be used	for future annual re	port notification	1)
For further information conce	rning this matter, please o	eall:		
Sean Simonic			904 t	928-1040
(1	Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the fo	llowing amount made pay	able to the Florida	Department of	State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy enclosed)	Certif is Certif	0 Filing Fee icate of Status ied Copy tional Copy is osed)
<u>Mailing Ad</u> Amendmen		<u>S</u> :	treet Address mendment Sect	ion

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

## Articles of Amendment to Articles of Incorporation of

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

City of Life Jacksonville, Inc.

15 JUN 30 PM 4: 12

(Name of Corporation as c	urrently filed with the Flor	rida Dept. of State)
	N14000011685	
(Document	Number of Corporation (if k	nown)
Pursuant to the provisions of section 617.1006, Florida amendment(s) to its Articles of Incorporation:	Statutes, this <i>Florida Not Fo</i>	r Profit Corporation adopts the following
A. If amending name, enter the new name of the cor	poration:	
		The new
name must be distinguishable and contain the word "co "Company" or "Co." may not be used in the name.	orporation" or "incorporated	d" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDI	RESS)	
	·	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	()	***
	****	
). If amending the registered agent and/or registere		enter the name of the
new registered agent and/or the new registered o	ffice address:	
Name of New Registered Agent:		
	(F)	lorıda street address)
New Registered Office Address:		
		, Florida
	(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		the obligations of the position.
<del></del>	Signature of New Regist	tered 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)

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	<u>V</u> <u>Mil</u>	n Doe ke Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u> .	<u>Addres</u> s
1) Change	VP	Lisa Brailsford	3915 F Buckthorne Drive
Add			Orange Park, FL
X Remove			32065
2) Change	VP	Edletha L Brailsford	3915 F Buckthorne Drive
X Add			Orange Park, FL
Remove			32065
3 ) Change	<del></del>		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<u></u>
Add			
Remove			

If amending or addi (attach additional she	ng additional Arti	cles, enter cha (Be specific)	nge(s) here:		
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The	ie date of each amendment(s) adoption:	Fti.j	Eather than the
date	te this document was signed.	SECRETARY DIVISION OF G	' OF STAGE Orpobations
Eff	fective date if applicable:		<del>_</del>
	(no more than 90 days after amendment file date)	15 JUN 30	PM 4: 12
	ste: If the date inserted in this block does not meet the applicable statutory filing requirements, tement's effective date on the Department of State's records	his date will not be li	isted as the
Ado	loption of Amendment(s) ( <u>CHECK ONE</u> )		
	The amendment(s) was/were adopted by the members and the number of votes cast for the am was/were sufficient for approval.	endment(s)	
	There are no members or members entitled to vote on the amendment(s). The amendment(s) adopted by the board of directors.	was/were	
	Dated June 10, 2015		
	Signature Mass man Rola		
	(By the chairman or vice chairman of the board, president or other officer-thave not been selected, by an incorporator ~ if in the hands of a receiver, the other court appointed fiduciary by that fiduciary)		
	Marland Maurice Brailsford		
	(Typed or printed name of person signing)	<del></del>	
	President		
	(Title of person signing)	· <del></del>	