N16000005810

(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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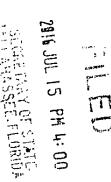
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JUL 2 5 2016

C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	cksonville Stevens Duva	l Senior Apartmo	nts Tenant Association In	1c.
DOCUMENT NUMBER: N16000005810				
The enclosed Articles of Amendment and fee a	re submitted for filing.			
Please return all correspondence concerning this	s matter to the following	: ·		
Linda Woolbright				
	(Name of Contac	t Person)		
Downtown Jacksonville Stevens Duval Senior	Apartments Tenanat Ass	ociation		
	(Firm/ Comp	any)		
601 North Ocean Street Suite 309				
•	(Address)		
Jacksonville Florida 32202				
	(City/ State and Z	ip Code)		
dwntwnjaxfltenassic@gmail.com				
E-mail address: (to b	e used for future annual	report notification	n)	•
For further information concerning this matter,	please call:			
Linda Woolbright		904 at	714 7058	
(Name of Contact I	Person)	(Area Code)	(Daytime Telephone N	lumber)
Enclosed is a check for the following amount m	ade payable to the Florid	da Department of	State:	
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee Certificate of S	Fee & \$\Bigs\square\$43.75 Filing F tatus Certified Copy (Additional copenclosed)	Certi by is Certi (Add	50 Filing Fee ficate of Status fied Copy itional Copy is osed)	
Mailing Address Amendment Section		Street Address Amendment Sec	tion	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Downtown Jacksonville Stevens Duval Senior Apartment Tenant Association Inc

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
N116000005810		
(Document Numb	per of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statut amendment(s) to its Articles of Incorporation:	es, this Florida Not For Profit Corporation a	dopts the following
A. If amending name, enter the new name of the corporat	tion:	
N/A		The new
name must be distinguishable and contain the word "corpord" "Company" or "Co." may not be used in the name.	ntion" or "incorporated" or the abbreviation	"Corpo" or "Inc."
B. Enter new principal office address, if applicable:	N/A	
(Principal office address MUST BE A STREET ADDRESS	,	हिंदे ज
,		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	00
D. If amending the registered agent and/or registered offi	ice address in Florida, enter the name of th	<u>e</u>
new registered agent and/or the new registered office	address:	_
Name of New Registered Agent: N/A		
	(Florida street address)	
New Registered Office Address:		
N/A	, Florid	
· ·	(City) (Zip	Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for		position.
	Signature of New Registered Agent, if changin	ng

P = President; V = Vice P	rector titi President, = Chief F	le by the f ; T= Trea inancial (Officer. If an officer/director holds more	Trustee; C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office
Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	ives the c	orporatio	on, Sally Smith is named the \emph{V} and $\emph{S}.$ The:	he PST and Mike Jones is listed as the V. There is se should be noted as John Doe, PT as a Change,
Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally St	ones	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) N/A Change				·
Add				
Remove				
2) N/A Change		_		
Add				
Remove				
3) N/A Change				·
Add				
Remove				
4) N/A Change				
Add				
Remove				
5) N/A Change				
Add				
Remove				
6) N/A Change		_		
Add			•	
Remove				

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:

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)				
ADD To AMEND ART.III (a) Said Corp. is organozed exclusively for charitable, religious, educational, and scientific				
purposes and the making of distributions to organizations under section 501 (3)(c) of the IRS Cod, and section of any future				
Tax Code. (b)Limitations: No Said Corp.NET earnings shall inure to benefit any Members, Trustees, Officers or any Private				
The Corp. shall be authorized to pay reasonable compensation for services rendered in the furtherence of stated Purposes.				
(c)Dissolution: Said Corp. upon dissolution, Assets shall be distributed according to exempt purposes within the meaning of				
Section 501(3)(c) of the Internal Revenue Code				

July 12, 2016	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
July 12, 2016 Effective date if applicable:	
(no more than 90 days after amendment file date)	.,
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	e listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) 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.	
Dated July 12, 2016 Signature Line Workship Workship	
Signature Wall Work	
(By the chairman or vice chairman 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)	-
Linda Woolbright	
(Typed or printed name of person signing)	
President	
(Title of person signing)	