N11000008063

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TALLAHASSEE FISTARE.

Amendcc

JUN 13 2018

I ALBRITTON

COVER LETTER

Division of Corporations
NAME OF CORPORATION: Shepherd'S Village Community, Inc
DOCUMENT NUMBER: N 17 00008663
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Manie Williams (Name of Contact Person)
Shepherd's Village Community Fre.
P.O. Box 491543
(Audiess)
Leesbury, FL 34749 (City/ State and Zip Code)
CHadelofhopea acl. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 352 - 787 - 7166 (Area Code) (Daytime Telephone Number)
(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:
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enclosed)

Mailing Address

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TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Additional Copy is

Enclosed)

Articles of Amendment

to

Articles of Incorporation

Shepherd's Village Co	mmunity Inc. ly filed with the Fibrida Dept. of State)	
N 17000008663	er of Corporation (if known)	
Pursuant to the provisions of section 617.1006, Florida Statutes amendment(s) to its Articles of Incorporation:	s, this Florida Not For Profit Corporation adopts the following	,
A. If amending name, enter the new name of the corporation	The new	
name must be distinguishable and contain the word — corporati "Company" or "Co." may not be used in the name B. Enter new principal office address, if applicable:	ion" or "incorporated" or the abbreviation "Corp." or "Inc." N/H	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A LLAMASS	n =
D. If amending the registered agent and/or registered officenew registered agent and/or the new registered office ac	e address in Florida, enter the name of the	ロフ
Name of New Registered Agent:		
New Registered Office Address:	(Florida street address)	
	, Florida (City) (Zip Code)	
New Registered Agent's Signature, if changing Registered in the Interest of the Agent of the Appointment as registered agent. I am fan		
Si	gnature 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)

Please note the officer/director title by the first letter of the office title:

 $P = President; \ V = Vice \ President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith. SV as an Add.

Example: X Change X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			<u></u>
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
, Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)
Adding to whaticle III.
(h) To serve As A sub-recipient and/or
Community Based Development Organization (CBDO) as they relate to the CDBC Program within and
as they relate to the CDBG Program within and
around the Flatwards Road neighborhood of
Lake Causty Florida.
(1) To provide improvements of the physical,
economic and/or social environment in and
around the Flatwoods Road neighborhood with
emphasis on the need of low very low, and
moderate income person.

	date of each amendment(s) adoption:
Effe	this document was signed. Continuous date if applicable: (no more than 90 days after amendment file date)
	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ument's effective date on the Department of State's records.
Ado	option 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.
ď	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 June 5, 2018
	Signature
	(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)
	(Typed or printed name of person signing)
	Encision T
	(Title of person signing)