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(((H10000259097 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6380

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From:

Email Address:

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Account Number : FCA000000023

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COR AMND/RESTATE/CORRECT OR O/D RESIGN MIAMI VOA ELDERLY HOUSING, INC.

Certificate of Status	0
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Page Count	067
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Mami VOA E	Iderly Housing, Inc.			
DOCUMENT NUMBER: N20792				
The enclosed Articles of Amendment and fee are su	bnitted for filing.			
Please return all correspondence concerning this ma	ater to the following:			
	ott Fireison (Contact Person)			
(rease o	Confact Ferson)			
	Hamilton LLP			
(Firm/ Company)				
600 Fourte	enth Street, N.W.			
(Address)				
Washing	ton, DC 20005	•		
(City/ Sta	ite and Zip Code)			
นีเครื่อกร <i>ั</i>	pepperlaw.com	•		
	d for future annual report notific	ation)		
For further information concerning this matter, please	e call:			
Scott Firelson	at (202) 220-15?			
(Name of Contact Person)	(Area Code & Daytir	ne l'étaphone Number)		
Enclosed is a check for the following amount made pr	ayable to the Florida Department	ol'State:		
S35 filing Fee S43.75 Filing Fee & Cenificale of Status	2 \$43.75 Filing Fee & Centified Capy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Centificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section	Street Address Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327 Taliahassee, Ft. 33314	Cliffon Building 2661 Executive Contex Tallahassee, Ft. 12301	Circle		

- 63 - 53

December 2, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

MIAMI VOA ELDERLY HOUSING, INC. VOLUNTEERS OF AMERICA, INC.

1660 DUKE ST

ALEXANDRIA, VA 22314-3427US

SUBJECT: MIAMI VOA ELDERLY HOUSING, INC.

REF: N20792

Please relate original filing date of submission uzz

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

The enclosed document must be filed as an amendment or the SECOND AMENDED AND RESTATED ARTICLES. THE FIRST AMENDED AND RESTATED ARTICLES WAS FILED ON 8/16/2010.

A certificate must accompany the Restated Articles of Incorporation setting forth one of the following statements: (1) The restatement was adopted by the board of directors and does not contain any amendments requiring member approval; OR (2) If the restatement contains an amendment requiring member approval, the date of adoption of the amendment by the members and a statement that the number of votes cast for the amendment was sufficient for approval.

If you have any questions concerning the filing of your document, please dall (850) 245-6964.

Irene Albritton Regulatory Specialist II FAX Aud. #: H10000259097 Letter Number: 910A00028071

Note: This is an Amendment to the first Amended and Restated Articles filed on 8/14/10

P.O BOX 6327 - Tallahassee, Florida 32314

Articles of Amendment to Articles of Incorporation of

Miami VOA Elderly Housing, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) N20792 (Document Number of Corporation (if known) Pursuant to the provisions of section 617,1006, Florida Statutes, this Florida Not For Profit Corporation adopts the following amendment(s) to its Articles of incorporation: A. If amending name, enter the new game of the corporation: The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Curp." or " Inc." "Company" or "Co." may not be used in the name. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mulling address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered affice address in Florida, enter the name of the new registered event and/or the new registered office address: Name of New Registered Agent: (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the ubligations of the position.

Signature of New Registered Agent, If changing

Page 1 of 3

100E 2 PH 2. 3

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: (Attoch additional sheets, if necessary)				
Title	<u>Name</u>	Ads	rese	Type of Action
				☐ Remave
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				☐ Add ☐ Remove
E. <u>If amend</u> (unach add See attach	ing or adding <u>ydditional</u> duional sheets, if necessa ed.	Articles, enter change (y) (Be specific)	(\$) here:	
				-
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FIRST AMENDMENT TO AMENDED AND RESTATED ARTICLES OF INCORPORATION OF MIAMI YOA ELDERLY HOUSING, INC.

This First Amendment to Amended and Restated Articles of Incorporation of Miami VOA Elderly Housing, Inc. (the "Corporation"), was adopted at a meeting of the Board of Directors of the Corporation, duly held on November 3, 2010:

FIRST: Section c. of ARTICLE XII is amended and restated in its entirety as follows:

"c. Any new entity with control over the Corporation, must agree to be bound by the note, mortgage/deed of trust, security agreement, Debt Service Savings Agreement, Use Agreement, Regulatory Agreement and any other documents required in connection with the HUD-insured toan (the "HUD Loan Documents") to the same extent and on the same terms as the other members."

SECOND: That said amendment was duly authorized and adopted by the Board of Directors of the Corporation, and the Assistant Secretary of the Corporation was directed to certify and file this amendment with the Amendment Section, Division of Corporations, Florida Department of State, and be inserted in the minute book of the Corporation.

IN WITNESS WHEREOF, the undersigned hereby certifies that the facts hereinabove stated are true and that the execution hereof is his/her voluntary act and deed and the voluntary act and deed of said Corporation.

Dated this 5th day of November, 2010

MIAMI VOA ELDERLY HOUSING, INC.

David T. Howman, Assistant Secretary

Commenceally Virginia , STAFFE OF Virginia , STAFFE OF Alexandria ,

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, the foregoing instrument was acknowledged before me by David T. Bowman, who is personally known to me.

My commission expires 11 30 2013

Commonwealth of Virginia
Juanno S. Guzzetta - Notary Public
Commission No. 284687
My Commission Expires 11/30/2013

The date of each amendment(s) adoption	
Effective date if applicable:	(dute of adoption is required)
	no more than 90 days after amendment file dutes
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted was/were sufficient for approval.	by the members and the number of voles cast for the antendment(s)
There are no members or members en adopted by the board of directors.	titled to vote on the amendment(s). The amendment(s) was/were
Daled 115 20 Signature D.	10
(By the chairman have not been	en or vice chairman of the board, president or other officer-if directors selected, by an incorporator — if in the hands of a receiver, trustee, by cointed fiduciary by that fiduciary)
Day	(Typed or printed name of person signing)
ASS	1Stant Secretary (Title of person signing)

Page 3 of 3