División de Consolations

lorida Department of State

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To:

Division of Corporations

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From:

Account Name : LEGALZOOM.COM INC.

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COR AMND/RESTATE/CORRECT OR O/D RESIGN CLEVELAND HOMES AND RESTORATION MANAGEMENT SERVICES

Certificate of Status	0
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Page Count	08
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Corporate Filing Menu

Help

COVER LETTER

TO:	Aniendment Section
	Division of Corporations

NAME OF CORPORATION:	ES AND RESTORATI	ON MANAGEMENT SERVIC	CES INC
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are sub-	mitted for filing		
Please return all correspondence concerning this matte	er to the following:		
Chey	enne Moseley		
	(Name of Contact Pers	on)	
Legalz	zoom.com, Inc.		
	(Firm/Company)		
101 N. Bra	nd Blvd., 11th Floor		
	(Address)		
Glend	ale, CA 91203		
	(City/ State and Zip Co	rte)	
nicole.smith080@gmail.com			
E-mail address: (to be used	for future annual repor	t notification)	
For further information concerning this matter, please	call.		er G
Cheyenne Moseley	800 at (773-0888 ext. 9724	್ಷ: ಕ್ರ-
(Name of Contact Person)		Code & Daytime Telephone N	unsber)
Enclosed is a check for the following amount made pa		_	7.5
S35 Filing Fee S43,75 Filing Fee &	■\$43,75 Filing Fee &	□S52.50 Filing Fee	

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Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327

Certificate of Status

Street Address

Amendment Section Division of Corporations Clifton Building

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(Additional Copy is Enclosed)

Certified Copy

From: Laura Rodriguez

Articles of Amendment to Articles of Incorporation of

	Articles of Incorporation of			
CLEVELAND HOMES AND RESTORATIO	N MANAGEMENT SERVICES IN	С		
(Name of Corporation as currently filed	with the Florida Dept. of State)			
N21000006477				
(Document)	Sumber of Corporation (if known)	-		
Pursuant to the provisions of section 617,1006, Famendment(s) to its Articles of Incorporation:	lorida Statutes, this Florida Not For	Profit Corporation	adopts the following	
A. If amending name, enter the new name of t	the corporation:			
Community Homes and Restoration Manage	ement Services Inc.		Theorem	
name must be distinguishable and contain the wa "Compuny" or "Co." may not be used in the na		or the abbreviation	The new on "Corp." or "Inc."	
B. Enter new principal office address, if applied	cable:			
(Principal office address <u>MUST BEA STREET</u>	(ADDRESS)		20	
			2023 HAY 1	وعريت
				2 F
C. Enter new mailing address, if applicable:			公司	E-12-2
(Mailing address MAY BEA POST OFFICE	<u>E BOX</u>)			1
			AM 10: 1	K
		-	-n=:	
			<u> </u>	1
D. If amending the registered agent and/or re-		nter the name of t	:he	
new registered agent and/or the new register	ered office address:			
Name of New Registered Agent:				
	(Florada 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 ago		e obligations of the	e position.	

Signature of New Registered Agent, if changing

To:

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.

X.Change X.Remove X. Add	<u>V</u> <u>Mik</u>	n Doe se Jones ly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change	T,S, D	CLEVELAND, TOLANDO	1878 GREEN ISLAND CIRCLE
Add XRemove			ORANGE PARK, FL 32065
2) Change	T.S	Paula Wallace	7523 Walden Court
X Add			Jacksonville, FL 32244
Remove 3) Change	D	Cleveland , Tolando , Jr.	1878 GREEN ISLAND CIRCLE
Add			ORANGE PARK, FL 32065
Remove 4) Change	D	Cleveland, Dorean	1878 GREEN ISLAND CIRCLE
Add			ORANGE PARK, FL 32065
X Remove			2023 HAY
5) Change Add			
Remove			SEE F
61 Change		·	# <u>**</u>
Add			

If amending 0r adding additional Arti attach additional sheets, if necessary),	(Be specific)			
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	The date of euch amendment(s) adoption: 04/27/2023 date this document was signed.				
EII	ective date if applicable:				
	(no more than 90 days after amendment file date)	_			
Ade	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.				
	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 May Races				
	Signature Ville State City				
	(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)	_			
	Nicole Cleveland				
	(Typed or printed name of person signing)				
	President				
	(Title of person signing)				