N21787

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: CAS	A 12, Inc.	
DOCUMENT NUMBER:	127787	
The enclosed Articles of Amendment and fee are subm	nitted for filing.	
Please return all correspondence concerning this matte	er to the following:	
Kuthleen (Name of C	Ricker	
(Name of C	Contact Person)	
(Firm/	Company)	
25 17 U	11455es Road	
(,	
tallaha	ssee FL 32312	
(City/ State	e and Zip Code)	
	ev @ Comeast, net	
For further information concerning this matter, please	·	
	at (<u>850</u>) <u>893-4058</u> (Area Code & Daytime Telephone Nu	3 [;]
		mberj
Enclosed is a check for the following amount made page.	syable to the Florida Department of State:	
\$35 Filing Fee \$\ Certificate of Status	□ \$43.75 Filing Fee & □ \$52.50 Fil Certified Copy Certificate of (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)	f Status by Copy
Mailing Address 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	

Articles of Amendment to Articles of Incorporation

of

CASA 12, Jue.

Orporation as currently filed with the Florida Dept. of

N 27787

(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:

he new name must be distinguishable and co obreviation "Corp." or "Inc." <mark>"Company" o</mark> i		
Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>		
rancipul office unitess <u>most bil A STREL</u>		
		• W-40-
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	CE BOX)	
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(Manage and Cos MANA DE MANAGE AND MANAGE AN		
(Managaran Coo Managaran Coo M		
If amending the registered agent and/or r	egistered office address in	Florida, enter the name of th
. <u>If amending the registered agent and/or registered agent and/or the new regis</u>	egistered office address in	Florida, enter the name of th
. If amending the registered agent and/or r	egistered office address in	Florida, enter the name of th
. If amending the registered agent and/or renew registered agent and/or the new regis	egistered office address in	
e. If amending the registered agent and/or registered agent and/or the new registered agent and/or the new registered Agent:	egistered office address in tered office address:	

Signature of New Registered Agent, if changing

position.

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)

<u>Title</u>	<u>Name</u>		<u>Address</u>		Type of Action
VP	Gary Mosie	<u> </u>	3536 D	aylily Land ee FL 32308	Add Remove
S	April Crou	ley	1816 La	rette Dr. 132301	Add Remove
. —		 ,			☐ Add ☐ Remove
	ling or adding additional Aiditional Aiditional sheets, if necessary).				
	Title: Name: Address: City-St-Zi _j	AKOM, ROCI 2981 BARCL TALLAHASSE	VIVE AY COURT EE, FL 32309 US	ctor	
	Title: Name: Address: City-St-Zip	EVANS, WILL 1713 GILVEN			
	Title: Name: Address: City-St-Zip:	HINES, DIANE	Treas	urer	
	Title: Name: Address: City-St-Zlp:	P RICKER, KATH 2928 PARRISH	ILEEN O		
	Title: Name: Address: City-St-Zip:	DAVIS, JAMES			
		-			
				;	

The date of each amendment(s) adoption	:June 8, 2011
	(date of adoption is required)
Effective date if applicable: (no	more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by was/were sufficient for approval.	the members and the number of votes cast for the amendment(s)
There are no members or members entitiadopted by the board of directors.	tled to vote on the amendment(s). The amendment(s) was/were
Dated	12011 Athleen O. Richer
Signature	athleen O. Richer
have not been se	or vice chairman of the board, president or other officer-if directors elected, by an incorporator – if in the hands of a receiver, trustee, or inted fiduciary by that fiduciary)
K	lathleen O. Ricker
	(Typed or printed name of person signing)
	President
	(Title of person signing)

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