## N39875

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8/3/10

## **COVER LETTER**

TO: Amendment S Division of Co			
NAME OF CORE	PORATION: Bunner	man Bluff H	omowen AssA
DOCUMENT NU	MBER: N - 39	875	
The enclosed Artic	les of Amendment and fee a	are submitted for filing.	
Please return all co	rrespondence concerning th	is matter to the following:	
		many Joanne	. Troutman
	Florida As	Sn + Proper Firm/Company	Mat.
	_	x 11143	
	,	Address	
-	Tallahasa	ity/ State and Zip Code	3230 2
	nidocean o c	•	
•	L'inan address. (10 de deci	a tor taure amuai report normeation	
For further informa	tion concerning this matter.	•	
Joanie T	routman	at (850 ) 56	6-4422
Name o	of Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a check	for the following amount m	ade payable to the Florida Dep	partment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

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 An	nendment		•
	to			•
	Articles of Inco	rporation	FILE	<i>)</i>
Bannerman	BUFF	Homie	OWNER ASSA	illation
(Name of Corporation as curr	ently filed with 1			TATE: Inc
N-3991	25 ·		INCOMET. FE	URIDA
. (Document Nur	mber of Corporati	on (if known)		
Pursuant to the provisions of section 607.100 amendment(s) to its Articles of Incorporation:			Profit Corporation ado	pts the following
A. If amending name, enter the new name of	of the corporation	រៈ		
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "probable Enter new principal office address, if app (Principal office address MUST BE A STREE	e designation "Ĉo ofessional associa olicable:	orp," "Inc," or tion," or the abb	GCO". A professional control of Sun ruy  GSIPP CL	corporation .
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI	CE BOX)	P.O. Box	11143	- 2.
D. If amending the registered agent and/or new registered agent and/or the new registered agent			da, enter the name of t	<u>he</u>
Name of New Registered Agent:			·	
New Registered Office Address:	(Florid	la street address)		
	(City)		, Florida (Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered a			ept the obligations of the	position.
	Signature of New	Registered Agent,	if changing	•

removed and title, name, and address of each Offic (Attach additional sheets, if necessary)	
Title Name D Tony Devos  Patti Whitins D Amy Whitins	Address  BS12 Eunipermen  Tallahestee, Fe  32312  US12 Bannerman Bloff DI. Add  Tallahestee, Fe  Tallahestee, Fe  32312  BS25 Bannerman Bloff D. Add  +allahastee, Fe  32312  Remove
E. If amending or adding additional Articles, enter (attach additional sheets, if necessary). (Be specified)	
Remove ten Mil	ton Direton P.
Remove Ken Mil 8552 Bannerman Tullahassee, FL 3	510F+ 101; 52312
F. If an amendment provides for an exchange, recognisions for implementing the amendment if (if not applicable, indicate N/A)	

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)

Title '	Name	Address	Type of Action
VP_	Reher Morre	9520 Banuman bl tallahaster 52	Add Remove
_0_	Ed Talister	8524 Barmerman	$ \rho_1$ .
<u>D</u>	James Durrett	BSUY Bannerman Tallahaster, PG 5231	BIV Add  Remove
	ding or adding additional Articles, enter dditional sheets, if necessary). (Be specif		
·			
provisio	nendment provides for an exchange, recons for implementing the amendment if a contract of applicable, indicate N/A)	lassification, or cancellation on the amendm	of issued shares, ent itself:
	,	And the state of t	

	(date of adoption is required)
Effective date <u>if applicable</u> :	· · · · · · · · · · · · · · · · · · ·
es es	(no more than 90 days after amendment file date)
doption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
The amendment(s) was/we must be separately provide	re approved by the shareholders through voting groups. The following statement of for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	
•	(voting group)
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	
Signature (By sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)
Signature (By sele	ceted, by an incorporator – if in the hands of a receiver, trustee, or other court cointed fiduciary by that fiduciary)  Todd  Cimmin
Signature (By sele	ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)