19600006513

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TALLAH ASSEEL FLORION

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COVER LETTER

TO: Amendment Section Division of Corporations

Sweet Home Commun NAME OF CORPORATION:	ity Builders, Inc.		
N96000006513			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submi	tted for filing.		
Please return all correspondence concerning this matter	to the following:		
Olivia Carcy			
(1	Name of Contact Pe	erson)	
Sweet Home Community Builders, Inc.			
	(Firm/ Company	<u>/)</u>	
10701 SW 184 Street			
	(Address)		
Miami, FL 33157			
((City/ State and Zip	Code)	
ocarey@sweethome.org			
E-mail address: (to be used for	or future annual rep	ort notification)
For further information concerning this matter, please ca	all:		
Olivia Carey	at	786	897-0795
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made paya	ible to the Florida I	Department of S	State:
\$35 Filing Fee \$\Bigcup \\$43.75 Filing Fee & Certificate of Status	1\$43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certifi s Certifi	O Filing Fee cate of Status ed Copy ional Copy is sed)

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

Sweet Home Community Builders, Inc.	
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
N96000006513	
(Document Nu	umber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	stutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	ration:
N/A	The new
name must be distinguishable and contain the word "corpo" "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
n n and a state of the address if applicable	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u>SS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/a
(Muning analysis Mari Distriction	
D. If amending the registered agent and/or registered of	office address in Florida, enter the name of the
new registered agent and/or the new registered office	ce address:
N/A	
Name of New Registered Agent:	
	(Florida street address)
New Registered Office Address:	()
	. Florida
	(City) (Code).
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	red Agent: I familiar with and accept the obligations of the position.
1 merco, accept the appointment of a	10 m) - 10 m) - 10 m)
N/A	177 C D 1 mg 1
	Signature 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, an	ıd
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.

Example: X Change X Remove X Add	PT John D V Mike John SV SV Sally S	ones	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	D	Gladys Fisher	14805 SW 155 Place
x Add			Miami, Florida 33196
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional A (attach additional sheets, if necessary).	(Be specific)				
N/A ·					
	 				
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	date of each amendment(s) adoption:, it is document was signed.	f other than the
	ctive date if applicable:	_
,	(no more than 90 days after amendment file date)	
N <u>ote</u> docu	in If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be liment's effective date on the Department of State's records.	sted as the
Ado	ption 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 18, 2017	
	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)	
	Theo Johnson	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	