N99000001472

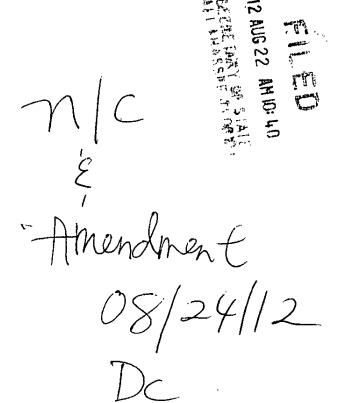
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>THE ZEPHYRHILLS F</u>	FLORIDA UNIT 65, DAVA CORPORATIO
DOCUMENT NUMBER: N9900001472	2
The enclosed Articles of Amendment and fee are submitted f	for filing.
Please return all correspondence concerning this matter to the	e following:
CYNTHIA J. EZSAK	
(Name	e of Contact Person)
ZEPHYRHILLS DAVA 65	
(F	Firm/ Company)
5917 BUTTON FLOWER C	T
	(Address)
ZEPHYRHILLS, FL 33541	
(City/	State and Zip Code)
EZCJE@YAHOO.CO	
E-mail address: (to be used for fut	ture annual report notification)
For further information concerning this matter, please call:	
CYNTHIA EZSAK	_ _{at} 813 783-3333
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made payable to	to the Florida Department of State:
∞ (Add enc	2.75 Filing Fee & Status tified Copy ditional copy is closed) 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 Amendment to Articles of Incorporation of

THE ZEPHYRHILLS FLORIDA UNIT 65, DAVA CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

N99000001472

(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:

		UXILARY OF FL INC. The ne
name must be distinguishable and contair <mark>"Company" or "Co." may not be used in</mark>		rated" or the abbreviation "Corp," or "Inc.
B. Enter new principal office address, i (Principal office address <u>MUST BE A ST</u>		
C. Enter new mailing address, if appli (Mailing address <u>MAY BE A POST (</u>		
D. If amending the registered agent an new registered agent and/or the new		rida, enter the name of the
Name of New Registered Agent:	CYNTHIA J. EZSAK	
	5917 BUTTON FLOW	'ER CT
New Registered Office Address:	(Florida street addres	s)
	ZEPHYRHILLS	, Florida 33541
	(City)	(Zip Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe		cept the obligations of the position.

Page 1 of 4

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.

Example: X_Change X Remove X Add	V Mik	n Doe e Jones y Smith	•
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	TREA	THERESA SOMMERS	39946 SUNBURST
Add			DADE CITY, FL 33542
X Remove			
2) Change	JVC	PATRCIA WEIDERMAN	5137 BERNEDETTE DR
Add			ZEPHYRHILLS, FL 33541
X Remove			
3) Change	TREA	CYNTHIA J. EZSAK	5917 BUTTON FLOWER CT
X Add			ZEPHYRHILLS, FL 33541
Remove			
4) Change	JVC	MARY RONGEY	P.O. BOX 359
$\frac{X}{X}$ Add			ZEPHYRHILLS, FL 33539
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			*
Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) CHANGE OF THE EIN NUMBER OLD NUMBER #23-7331152		
****NEW EIN NUMBER ISSUED BY IRS ON 05/25/2012 #32-0380537***		

The date of each amendment(s) add	option:07/03/2012
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were add was/were sufficient for approval	opted by the members and the number of votes cast for the amendment(s) i.
There are no members or memb adopted by the board of director	ers entitled to vote on the amendment(s). The amendment(s) was/were rs.
Dated 07/03/2	2012
Signature Min	nie 4. amerman
have not bee	nan or vice chairman of the board, president or other officer-if directors n selected, by an incorporator – if in the hands of a receiver, trustee, or ppointed fiduciary by that fiduciary)
MINNIE F.	AMERMAN
	(Typed or printed name of person signing)
COMMANI	DER
=======================================	(Title of person signing)