Po3000045805

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COVER LETTER

TO: Amendment Section

Division of Corporations
NAME OF CORPORATION: Central Florida Home Management, Inc.
DOCUMENT NUMBER: P0300045805
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
David Kassar Name of Contact Person Central Florida Home Management, Inc Firm/Company 7036 Mapperton DR Address Winder Mere, FL 34-786 City/State and Zip Code dave Kassar a hotmail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
David Kassar at (407) 905 9085 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$\sqrt{35}\$ Filing Fee \times Certificate of Status Certified Copy (Additional Copy is enclosed) \$\sqrt{35}\$ Filing Fee \times Certified Copy (Additional Copy is enclosed) \$\sqrt{35}\$ Filing Fee \times Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

	of	. F	TLED
Central Horida Hom	e Managemer		21 AM 9: 19
(Name of Corporation as curren		nt of State) MIN SET	<u>C</u> 1
P03000045805		1270 m	ARY OF STATE ASSEE. FLORIDA
(Document Numb	er of Corporation (if known)	TALLAH	7 22500 0
Pursuant to the provisions of section 607.1006, Fi its Articles of Incorporation:	lorida Statutes, this <i>Florida Pi</i>	ofit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of t	he corporation:	1	
	Ų	14	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "word "chartered," "professional association," of	Corp," "Inc," or "Co". A p		or the abbreviation
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET		1 4	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>	nla	
D. If amending the registered agent and/or reg new registered agent and/or the new register		rida, enter the name of the	<u> </u>
Name of New Registered Agent	N 4		
	•		
	(Florida street address))	
New Postatora I Office A I I con	,	rd	
New Registered Office Address:	(City)	, Florida(Zip	Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age			vosition.

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	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>\$V</u>	Sally Si	mith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	DP	_	Denise Lesley Kassar	7036 Mapperton De
Add				Windermere
X Remove				FL 34786
2) X Change	DST	-	David P. Kassar	2036 Mapperton De Windermere, FZ
Add				Windermere, Fr
Remove				34786
3) Change	-	_		
Add				
Remove				
4) Change	-			
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change	<u> </u>	_		
Add				
Remove				

Notes:

Currently Denise Lesley Kassar is listed as the DP and David R. Kassar is listed as the DST. There is a change, Denise Lesley Kassar leaves the Corporation, David R. Kassar is named the DP. These should be noted as David R. Kassar, DST as a change, Denise Lesley Kassar, DP as Remove.

	onal sheets, if nece.	ssary). (Be specij	fic)	1.4	
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	nent provides for	an exchange, recla	ssification, or can	cellation of issued :	shares.
f an amendn	or implementing t	he amendment if n	ot contained in th	e amendment itself	<u>6</u>
f an amendn provisions fo		N/A)			
f an amendn provisions fo (if not ap	pplicable, indicate				
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f an amendn provisions fo (if not ap	pplicable, indicate		n/f		
f an amendn provisions fo (if not ap	pplicable, indicate		n f	7	

he date of each amendment(s) ad	loption: 4-19-12
Affective 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 ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast i	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder
I The amendment(s) was/were adoption was not required.	pted by the incorporators without shareholder action and shareholder
Dated 09	1/19/2012 Eller.
Signature	
selected	rector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
_	Devise L. Kassar (Typed or printed name of person signing)
	(Typed or printed name of person signing)
_	President
_	(Title of person signing)