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And

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: WINDSOR REDEV	ELOPMENT CORPORA	TION
DOCUMENT NUMBE	R:		
	Amendment and fee are sub	mitted for filing.	
Please return all correspo	ondence concerning this matt	er to the following:	
G	ABRIEL W. FALBO, JR.		
		Name of Contact Persor	1
		Firm/ Company	
]=	4502 N. DALE MABRY HIG	GHWAY, SUITE 200	
_		Address	
T.	AMPA, FL 33618		
		City/ State and Zip Cod	e
gfalbol	@tampabay.π.com		✓
	E-mail address: (to be use	ed for future annual report	notification)
For further information of	concerning this matter, please	e call:	
GABRIEL W. FALBO, JR.		at (813	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	ayable to the Florida Depa	artment of State:
☐ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 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		Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

of

WINDSOR REDEVELOPMENT CORPORATION

(<u>Name</u> c		tly filed with the Florida Dept. of State)		
	P03000	054010		
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation adopts the fol-	lowing ame	ndment(s) to
A. If amending name, enter the new na	me of the corporation:			
N/A			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	on." "company," or "incorporated" or i "Co". A professional corporation name i "P.A."	he abbrevi must contai	ation n the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		104 EASTPARK DRIVE, SUITE 250		
		BRENTWOOD, TN 37027	- 77	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		104 EASTPARK DRIVE, SUITE 250	, z	Tiri C
		BRENTWOOD, TN 37027	28 	
D. If amending the registered agent an new registered agent and/or the new			<u>-</u>	_
Name of New Registered Agent	GABRIEL W. FALBO, J	R		
	14502 N. DALE MABRY	Y HIGHWAY, SUITE 200		
	(Florida s	treet address)		
New Registered Office Address:	ТАМРА	336 , Florida	518	
	-	(City)	(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agen	·*-		
I hereby accept the appointment/as regist	ered agent_l am familiar	with and accept the obligations of the posi	tion.	
\\u	hil W	Luce		
	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, 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			- ·
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			<u> </u>
6) Change		<u></u>	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
	 .
	·
	***** - ***
F. If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itself.	<u>shares,</u> If:
(if not applicable, indicate N/A)	
N/A	

	DECEMBER 31, 2017	
The date of each amendment date this document was signed		, if other than the
•	DECEMBER 31, 2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amend ere sufficient for approval.	ment(s)
☐ The amendment(s) was/wei must be separately provide	re approved by the shareholders through voting groups. The following seed for each voting group entitled to vote separately on the amendment(s	tatement):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shar	eholder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	der
FEB Dated Signature	RUARY 19-2019 DV	
(f:	By a director, president or other officer – if directors or officers have not elected, by an incorporator – if in the hands of a receiver, trustee, or other properties of iduciary by that fiduciary)	
	CLINTON G. FEHR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	