P0300136357

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SECRETARY OF STATE
FALLAMASSEE FLORMA

JUN 2 7 2018 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Springhill Holding	gs Inc	
DOCUMENT NUMB	P03000136357		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Elizabeth C Sanders		
	Springhill Holdings Inc	Name of Contact Persor)
		Firm/ Company	
	3780 NW 83rd Street	Time Company	
-		Address	
	Gainesville, FL 32606		
-		City/ State and Zip Code	2
meliss	sab@pcpgnv.com		
		sed for future annual report	notification)
For further information Melissa Blaylock	concerning this matter, pleas	se call: at (at (248-0679
Name o	f Contact Person	at (at Co	de & Daytime Telephone Number
	the following amount made		,
\$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)
Ame Divis P.O.	ing Address indiment Section sion of Corporations Box 6327 hassee, FL 32314	Amend Divisie Clifton 2661 E	Address Iment Section on of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment Articles of Incorporation of

Springhill Holdings Inc

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
P03000136357	STATE OF THE STATE
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation:	
Springhill Property Holdings Inc.	The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	n/a
(Principal office address MUST BE A STREET ADDRESS)	Pin
	2 7
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	n/a
	- Ser or
D. If amending the registered agent and/or registered office ad	
new registered agent and/or the new registered office addre	<u>ss:</u>
Name of New Registered Agent	
(Florida :	street address)
New Registered Office Address:	. Florida
New Registered Office Madress.	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Aget	nt: NIA
I hereby accept the appointment as registered agent.—I am familia	r with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
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.

X Change	<u>PT</u>	John Doe			
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith	110		
Type of Action (Check One)	Title	Name	NIA	Address	
1) Change					
Add					
Remove					
2) Change			· -		
Add					
Remove					
3) Change				<u> </u>	
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Add					
INCHINATE.					

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 shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
-N\H	

•	06/15/2018	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	6/15/2018	
Effective date if applicable:	(no more than 9t) days after amendment file date)	
	in more man to days after amendment in agree	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendment sufficient for approval.	(s)
	pproved by the shareholders through voting groups. The following staten or each voting group entitled to vote separately on the amendment(s):	ieni
	st for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
•	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and sharehold	ler
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
06/15/20 Dated Signature	Elin Render	
	director, president or other officer - if directors or officers have not been	
	ted, by an incorporator – if in the hands of a receiver, trustee, or other cou inted fiduciary by that fiduciary)	it(
арре	inted fiduciary by that fiduciary)	
	Elizabeth C. Sanders	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	