## P04000089461

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Miramar Senior Liv	ving Inc.	
DOCUMENT NUMBER: P04000089401		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	tter to the following:	
Vincent J. Herryman		
	Name of Contact Persor	1
Miramar Senior Living Inc.		
	Firm/ Company	
5161 Collins Ave Suite 1002		
THE STATE OF THE S	Address	
Miami Beach, FL 33140		
-	City/ State and Zip Code	;
vincentherryman@aol.com		/
E-mail address: (to be us	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
Vincent J. Herryman	at (305	) 305-1275 de & Daytime Telephone Number
Name of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$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 Tallahassec, FL 32314	Amend Divisio Cliston	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Miramar Senior Living Inc.				
	of Corporation as curren	tly filed with the Florida Dept. of St	ate)	
P04000089401				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, thi	s Florida Profit Corporation adopts th	ne following amendment	t(s) to
A. If amending name, enter the new na	ame of the corporation:			
N/A			The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation n	or the abbreviation	
B. Enter new principal office address, if applicable:		5161 Collins Ave, Suite 1002		
(Principal office address MUST BE A S		Miami Beach, FL 33140	29	
			AR 5	n
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		5161 Collins Ave, Suite 1002	5 PM	T 7
		Miami Beach, FL 33140	F. S. 4.	
D. If amending the registered agent an new registered agent and/or the new			n <u>e</u>	
Name of New Registered Agent	Vincent J. Herryman			
	5161 Collins Ave, Suite	1002		
	(Florida s	treet address)	, <u>a mareterma</u>	
New Registered Office Address:	Miami Beach	, Florio	33140	
		(City)	(Zip Code)	
	•			
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agen tered agent. I am familian	it: - with and accept the obligations of the	position.	
·· <del>·····</del>	Signature of New	Registered Agent, if changing	<del></del>	

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	PT	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
	,
an amendment provides for an eych	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(it not annlicable indicate N/A)	
(if not applicable, indicate N/A)	
(y not appacasie, maicuie IVA)	
у, пол аррасионе, тинсине 19/А)	
у пог аррасионе, тинсине 19/А)	
(y not appacasie, maicuie IVA)	
(y not applicable, malcule WA)	
(y not appacasie, maicuie IVA)	
(y not applicable, malcule IVA)	
(y not applicable, maleure IVA)	

The date of each amendment(s) adoption: date this document was signed.	_, if other than the
Effective date if applicable:	
Effective date <u>if applicable</u> :  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
06/01/2017 Dated	
Signature  (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Vincent J. Herryman	
(Typed or printed name of person signing)	<del></del>
President	
(Title of person signing)	