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PICK-UP	☐ WAIT	MAIL
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: AJR LOVING CA	RE ASSISTED LIVING F	ACILITY, INC.
DOCUMENT NUMI	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	ANNE BARLATIER		
	-	Name of Contact Perso	n
		Firm/ Company	
	2667 ALOMA OAKS DRIV	Е	
	OVIEDO, FL 32765	Address	
		City/ State and Zip Cod	
	E-mail address: (to be us n concerning this matter, plea	sed for future annual report	notification)
ANNE BARLATIER -		at (	)
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section		Street Address Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

AJR LOVING CARE ASSISTED LIVIN	IG FACILITY, INC.	
(Name o	of Corporation as current	ly filed with the Florida Dept. of State)
P07000090401		
-	(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ime of the corporation:	
Anne's Home Winter Park, Inc.		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered." "professional association."	lorp," "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Corp" A professional corporation name must contain the word "
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		1554 Dodd Rd.
		Winter Park, F1. 32792
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2667 ALOMA OAKS DRIVE
		OVIEDO, FL 32765
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	ANNE BARLATIER	
,	2667 ALOMA OAKS DE	RIVE
	(Florida si	treet address)
New Registered Office Address:	OVIEDO	, Florida 32765
The transferred on College Credit Prints.		(City) (Zin Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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: XChange	PT	John Doe	
X Remove	$\underline{V}$	Mike Jones	
_ <u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DPT	CLERGE, ROSELINE C	638 WHITE CRANE COURT
Add			CHULUOTA, FL 32766
X Remove			
2) Change			
Adđ			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			<u>.                                    </u>
Remove			<del></del>
6) Change		<del> </del>	
Add			
Damova			

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If an amendment provides for an exc	change, reclassification, or cancellation of issued shares	
If an amendment provides for an exc provisions for implementing the am-	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	
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If an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:	

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	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date	)
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requiremen Department of State's records.	ts, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the am sufficient for approval.	endment(s)
	pproved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
bv		
·	(voting group)	
August l Dated	1. 1. 1.	
selec	Hull Dallalle  director, president or other officer – if directors or officers have ted, by an incorporator – if in the hands of a receiver, trustee, or officed fiduciary by that fiduciary)	
	ANNE BARLATIER	
	(Typed or printed name of person signing)	<del></del>
	DVS	
	(Title of person signing)	