P08000021399

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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HILLI 2011 SEP 16 PM 1: 30 SECRETARY OF STATE

Amend
Brown 9-19-1/

COVER LETTER

Division of Corporations
NAME OF CORPORATION: TJ Assisted Living facility, In
DOCUMENT NUMBER: <u>\$08000021399</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
To may a Binns Name of Contact Person
Firm/ Company
4298 Gardenwood errcle
Grant Florida 32949 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (561) 541-7768 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee \$\begin{array}{c} \$43.75 Filing Fee &
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

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Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the c	7		The new
name must be distinguishable and contain the we abbreviation "Corp.," "Inc.," or Co.," or the design name must contain the word "chartered," "profession	nation "Corp,"	"Inc," or "Co". A	1 professional corporation
B. Enter new principal office address, if applicable	e:	MIA	
(Principal office address <u>MUST BE A STREET AD</u>		7-7	-
	·		
C. Enter new mailing address, if applicable:		.110	
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	<u> </u>	····
	-		
D. If amending the registered agent and/or registe		ss in Florida, ente	er the name of the
new registered agent and/or the new registered	office address:		•
Name of New Registered Agent:	N	1/+	_
-	7 1	1	•
New Registered Office Address:	(Florida stre	et address)	-
			Florida
 -	(City)	(Zip	_, Florida Code)
Now Desistand Agent's Signature if showing Desi	cintarral A comb.		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		th and accept the o	obligations of the position
The series of th	y		· · · · · · · · · · · · · · · · · · ·
Signatu	ure of New Regist	ered Agent, if char	

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)

<u>Title</u>	Name ///	<u>Address</u>	Type of Action
	<u> </u>		
	,		
			☐ Remove
	dding or adding additional Articles additional sheets, if necessary). (B		10
			• .
	·		
<u>-</u>			
F. If an a	mendment provides for an exchan ions for implementing the amendn	ige, reclassification, or cancellat	ion of issued shares, ndment itself:
(if	not applicable, indicate N/A)		
To	maya Binns	51%	
Co	Uliston Granar	n 39 8	
	aneil Allen		
		m 5 %	
b.	- 13		

The date of each amendmen	t(s) adoption:	, , ,	9.	11.2011
Effective date <u>if applicable</u> :	<u> </u>	date of adoption to	1	
,	(no more than 90 d	lays after amendm	ent file date)	
Adoption of Amendment(s)	(<u>CHEC</u>	CK ONE)		
The amendment(s) was/we by the shareholders was/w			umber of votes o	east for the amendment(s)
The amendment(s) was/we must be separately provide				
"The number of votes	cast for the amendme	ent(s) was/were su	ifficient for appr	roval
by			.,,	
	(voting group)			
The amendment(s) was/we action was not required.	re adopted by the boa	ard of directors w	ithout shareholde	er action and shareholder
The amendment(s) was/we action was not required.	re adopted by the inc	corporators withou	ıt shareholder ac	tion and shareholder
Dated	9.11. 20	0//		
Signature	Bu	in _	<i>J</i>	
sele		ator – if in the han		fficers have not been trustee, or other court
	TOM	or printed name of	Binner of person signing	5
	Pres	edent	Ţ	
	(Title of pe	rson signing)		