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SECRETARY OF STATE DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: New	Home Galleria, Corp.
DOCUMENT NUMBER:	08000077532
The enclosed Articles of Amendment and fe	ee are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Jame	ne of Contact Person)
(Na	me of Contact Person)
New	Home Galleria
	(Firm/ Company)
5798	S. Semoran Blud. Ste 121 (Address)
	(Address)
Orland	Lo FL 32822 V/ State and Zip Code)
(City	// State and Zip Code)
For further information concerning this matt	er, please call:
James Rose (Name of Contact Person)	at (407) 382 7400 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amoun	at made payable to the Florida Department of State:
\$35 Filing Fee \$\times \text{\$\frac{1}{2}\$	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

08 NOV 14 PM 12: 38

*	re Galleria Contly filed with the Florida Dept. of S	<u>State</u>)
P080	00077532	
(Document Numl	ber of Corporation (if known)	
arsuant to the provisions of section 607.1006 llowing amendment(s) to its Articles of Incorp		it Corporation ado
. If amending name, enter the new name of	the corporation:	
he new name must be distinguishable an incorporated" or the abbreviation "Corp.," 'Co". A professional corporation name ssociation," or the abbreviation "P.A."	"Inc.," or Co.," or the designation	"Corp," "Inc," or
B. Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable:	EE ROX)	
(Mailing address <u>MAY BE A POST OFFIC</u>		
. If amending the registered agent and/or re	egistered office address in Florida, e	nter the name of th
	egistered office address in Florida, e	nter the name of th
o. If amending the registered agent and/or re	egistered office address in Florida, e	nter the name of th
o. If amending the registered agent and/or re new registered agent and/or the new regist	egistered office address in Florida, e	nter the name of th

Signature of New Registered Agent, if changing

If amending the Officer's 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>	James Rose	5798 S. Semoran, Suite 121 Oclando FL 3282	Add Remove
	Nereida Gonzalez	5798 S. Semoran Bl. Suite 121 Orlando FL 3282	Add Remove
			_ 🗖 Add _ 🗖 Remove
	ling or adding additional Articles, enter of ditional sheets, if necessary). (Be specificational sheets)		
provisio	nendment provides for an exchange, recla ons for implementing the amendment if n ot applicable, indicate N/A)		

The date of each amendment(s	s) adoption: 11/11/08			
. Effective date <u>if applicable:</u>	11/11/08			
(no more than 90 days after amendment file date)				
Adoption of Amendment(s)	(CHECK ONE)			
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.			
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):			
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval			
by	voting group)			
(voting group)			
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder			
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder			
Dated	11/11/08 Ocas Pore			
Signature (By a select	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 court inted fiduciary by that fiduciary)			
	Typed or printed name of person signing)			
	(Typed or printed name of person signing) President			
	(Title of person signing)			