P10000019565

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	⇒#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



800241784878

-_ Te 11/48/12--01016--007 **35.00





(NOV 2 0 2012 C. MUSTAIN

COVER LETTER

TO: Amendment Section

Division of Corporations

Mailing Address

P.O. Box 6327

Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: Ocala Homes and Farms, Incomment number: P1000019565
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person OCALA Homes and Forms Firm/Company Address OCALA FORM Address City/ State and Zip Code E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Annette Suit at 350 200-9638 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)

Street Address

Clifton Building

Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Ocala t	tomes an	id Farms Tha	
(Name of Corporation as currently	y filed with the Florida De	pt. of State)	
PIOO	~~~190		
(Dogument Number	of Corporation (if known)		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>Florida Pi</i>	rofit Corporation adopts the following amend	ment(s) to
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the w	nord "comparation" "com	The n	
"Corp.," "Inc.," or Co.," or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co". A p		
B. Enter new principal office address, if applica	ble:		
(Principal office address <u>MUST BE A STREET A</u>		<u> </u>	
			had.
		75. 27 ·	r⊚ ≥
			<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	DAV.	SS SS	÷ 77
(Mauing address MAT BE A POST OF FICE I	<u></u>)		ILED
			Ď
	,-		
D. If amending the registered agent and/or regis	stered office address in Flo	**	
new registered agent and/or the new register	ed office address:		
Name of New Registered Agent			
Nume of New Registered Agent	 -	· · · · · · · · · · · · · · · · · · ·	
			
	(Florida street address	;)	
New Registered Office Address:		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing F			
I hereby accept the appointment as registered agen	t. I am familiar with and a	eccept the obligations of the position.	
Signature of	New Registered Agent, if ch	hanging	

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	V <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name	Address
1) Change	VTS Carla L Loro	4946 NW 3587
Add Remove		0xala, +C 34482
2) \(\sum_{\text{Change}} \)	VTS Anneth BSwi	
Add Remove		23907
3) Change		
Add Remove		
4)Change		
Add Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

Auach	nding or adding additiona additional sheets, if necess	ary). (Be specific	c)		
					· · · · · · · · · · · · · · · · · · ·
	·	·			
		<u> </u>	**		
·			1-11		
				. 200	
		,			oraclarity
provi	mendment provides for an islans for implementing the if not applicable, indicate N.	e amendment if no	sification, or can t contained in th	cellation of issued e amendment itsel	<u>shares,</u> f <u>:</u>
					
					
					

The date of each amendment(s) adoption: _	November 14, 2012
Effective date <u>if applicable</u> :	
1	(no more than 90 days after amendment file date)
Adoption of Amendment(s) (Cl	HECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.
	ne shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes cast for the ame	endment(s) was/were sufficient for approval
by(vo	ting group)
The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder
Dated 11 - 14 -	2012
Signature	nette B Seut
selected, by an inc	sident or other officer – if directors or officers have not been orporator – if in the hands of a receiver, trustee, or other court y by that fiduciary)
A	nnette B Swift
	(Typed or printed name of person signing)
	(Title of person signing)