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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: ______ JOYCE DEVELOPMENT GROUP SOUTHEAST, INC. DOCUMENT NUMBER: P11000044246 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: JOHN M JOYCE Name of Contact Person JOYCE DEVELOPMENT GROUP SOUTHEAST, INC. Firm/ Company 7795 MCLAURIN RD N Address JACKSONVILLE, FL 32256 City/ State and Zip Code joe@joeinjax.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: $at \, (\frac{904}{\text{Area Code \& Daytime Telephone Number}})$ JOHN M JOYCE Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee **□\$43.75** Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy 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 Articles of Incorporation



JOYCE DEVELOPMENT GROUP SOUTHEAST, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000044246

(Document Number of Corporation (if known)

ent(s) to

i. <u>If amending name, enter the new n</u> JOYCE INVESTMENT (The
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associe	nation "Corp," "Inc," or '	'Co". A professional co	
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>		N/A	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
			<u> </u>
(Mailing address <u>MAY BE A POST</u> D. <u>If amending the registered agent as</u>	OFFICE BOX) nd/or registered office add	ress in Florida, enter th	e name of the
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX) nd/or registered office add w registered office addres	ress in Florida, enter th	e name of the
(Mailing address MAY BE A POST D. If amending the registered agent an new registered agent and/or the ne	office BOX) ad/or registered office add w registered office addres N/A	ress in Florida, enter th	e name of the
(Mailing address MAY BE A POST). If amending the registered agent as new registered agent and/or the ne	nd/or registered office add w registered office addres N/A	ress in Florida, enter thes: reet address)	e name of the Orida

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 <math>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	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jos	ne <u>s</u>		
X Add	<u>sv</u>	Sally Sm	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_	N/A	_	
Add					
Remove					
2) Change					
Add		_		-	
Remove					
3) Change					
Add					
Remove					
4) Change					
Add		_		•	
Remove					
5) Change		_	·		
Add					
Remove					
6) Change		 -			
Add					
Remove					

N/A	mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
	40.
. <u>If a</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares,
. <u>If a</u> pr	ovisions for implementing the amendment if not contained in the amendment itself:
<u>pr</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
<u>pr</u>	ovisions for implementing the amendment if not contained in the amendment itself:
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lfa pr N/A	ovisions for implementing the amendment if not contained in the amendment itself:
<u>pr</u>	ovisions for implementing the amendment if not contained in the amendment itself:

The date of each amendment(s) adoption: 10/07/2013	, if other than the
date this document was signed.		<u> </u>
Effective date <u>if applicable</u> :	10/07/2013	
<u>pp</u>	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were by the shareholders was/were	e adopted by the shareholders. The number of votes cast for the amendment(s) re sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d 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)	
	(voung group)	
The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
Dated_OCT	OBER 7, 2013	
Signature	ah M. Gre	
se	y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	JOHN M JOYCE	
	(Typed or printed name of person signing)	
	PRESIDENT	_
	(Title of person signing)	