P11000069501

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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MAY 1 7 2017 C MCNAIR

COVER LETTER

17 MAY II AM 9: 46
SECRETARY OF STATE
TALLAHASSEE FLORIDA

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: THE OAKS - AM | ICORP, INC | | |
|-------------------------|--|--|--|-------------|
| DOCUMENT NUM | BER: P11000069501 | | | |
| | of Amendment and fee are su | ibmitted for filing. | | |
| Please return all corre | spondence concerning this ma | tter to the following: | | |
| | KIRK T. BAUER | | | |
| | | Name of Contact Persor | 1 | |
| | BAUER & ASSOCIATES, A | ATTORNEYS AT LAW, P. | A. | |
| | | Firm/ Company | | |
| | P.O. BOX 459 | , • | | |
| | | Address | | |
| | DELAND, FL 32721-0459 | | | |
| | | City/ State and Zip Code | 3 | |
| КВА | UER@DELANDATTORNE | YS.COM | | |
| | _ | sed for future annual report | notification) | |
| | • | • | , | |
| For further informatio | n concerning this matter, pleas | se call: | | |
| KIRK T. BAUER | | at (386 | | |
| Name | of Contact Person | Area Co | de & Daytime Telephone Nun | nber |
| Enclosed is a check for | r the following amount made | payable to the Florida Depa | artment of State: | |
| \$35 Filing Fee | ☐\$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | |
| Ame Divi P.O | iling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314 | Amend Divisio Clifton | Address ment Section n of Corporations Building xecutive Center Circle | |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



THE OAKS - AMICORP, INC.

17 MAY 11 AM 9: 46

to

| | 1/ 1/31 17 AT 2-4 |
|--|---|
| (Name of Corporation | on as currently filed with the Florida Dept. of State) |
| P11000069501 | TALLAHASSEE FLORIDA |
| (Docume | ent Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation: | Statutes, this Florida Profit Corporation adopts the following amendment |
| A. If amending name, enter the new name of the cor | <u>poration:</u> |
| | The new "corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the abbreviation "P 4" |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | 9 |
| D. If amending the registered agent and/or registere new registered agent and/or the new registered of | |
| Name of New Registered Agent | |
| | (Florida street address) |
| Naw Projectored Office Address: | |
| New Registered Office Address. | (City) , Florida(Zip Code) |
| | , Florida, Florida, (City) (Zip Code) stered Agent: am familiar with and accept the obligations of the position. |
| Signal | ture 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 <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>oe</u> | |
|----------------------------|--------------|-------------|-------------|-----------------|
| X Remove | <u>v</u> | Mike Jo | <u>nes</u> | |
| X Add | <u>sv</u> | Sally Sn | <u>nith</u> | |
| Type of Action (Check One) | <u>Title</u> | | Name | <u>Addres</u> s |
| 1) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | | |
| Add | - | | | |
| Remove | | | | |
| | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) IN ARTICLE IX, PARAGRAPH 2, THE DEFINITIONS FOR THE WORDS "LOAN" AND "LOAN DOCUMENTS" SHALL BE CHANGED AS FOLLOWS: "LOAN" MEANS THAT CERTAIN FIRST LIEN MORTGAGE LOAN IN THE ORIGINAL PRINCIPAL AMOUNT OF \$12,225,000.00 MADE BY WELLS FARGO BANK, NATIONAL ASSOCIATION ("LENDER") TO THE OAKS - AMICORP, INC. "LOAN DOCUMENTS" SHALL MEAN THE MULTI FAMILY LOAN AND SECURITY AGREEMENT, CONSOLIDATED MULTI FAMILY NOTE, CONSOLIDATED AMENDED AND RESTATED MULTI FAMILY MORTGAGE, ASSIGNMENT OF LEASES AND RENTS AND SECURITY AGREEMENT AND FIXURE FILING, UCC FINANCING STATEMENTS, ASSIGNMENT OF MANAGEMENT AGREEMENT, ENVIRONMENTAL INDEMNITY AGREEMENT, GUARANTY, AND SUCH OTHER AND FURTHER DOCUMENTS AS REQUIRED BY THE LENDER AND BETWEEN THE LENDER AND THE OAKS - AMICORP, INC. F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

| , , , , , , , , , , , , , , , , , , , | APRIL 17, 2017 | |
|---|--|-------------------------------|
| The date of each amendment(s) date this document was signed. | adoption: | , if other than th |
| _ | PRIL 27, 2017 | |
| 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 | s block does not meet the applicable statutory filing requirements, this Department of State's records. | date will not be listed as th |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment sufficient for approval. | nt(s) |
| | pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s): | ement |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| ☐ The amendment(s) was/were a action was not required. | dopted by the board of directors without shareholder action and shareholder | lder |
| ☐ The amendment(s) was/were a action was not required. | dopted by the incorporators without shareholder action and shareholder | |
| APRIL _ Dated | 18, 2017 1011+ | |
| Signature | | |
| | 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 contents. | |
| | inted fiduciary by that fiduciary) | |
| | KENT S, TITCOMB | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |