P12000005971

(Requestor's Name)					
i (Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
Marie L. Risselin Auth. the Adoption					
Auth. the Adoption					

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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 5, 2015

MARIE L. RISSELIN NEEKA UNIFORM, INC. 4400 EVERGREEN FOREST LOOP KISSIMMEE, FL 34758

SUBJECT: NEEKA UNIFORM INC. Ref. Number: P12000005971

We have received your document for NEEKA UNIFORM INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only 1(one) box.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

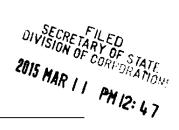
Irene Albritton Regulatory Specialist II

Letter Number: 615A00004598

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www.sunbiz.org

Articles of Amendment to' Articles of Incorporation



NEEKA UNIFORM, INC.

(Name of Corporation as	currently filed with the Fig	orida Dept. of State)	
P12000005971			
(Documen	Number of Corporation (if	known)	_
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this F	Clorida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
EML GROUP HOMES, IN	NC.		The new
	ntion "Corp," "Inc," or "C	" "company," or "incorporated" or the a o". A professional corporation name must 2.A."	hbreviation
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		4400 EVERGREEN FOREST LOOF	- -
		KISSIMMEE, FL 34758	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4400 EVERGREEN FOREST LOOF	- -
		KISSIMMEE, FL 34758	<u>-</u>
D. If amending the registered agent and new registered agent and/or the new		ess in Florida, enter the name of the	
Name of New Registered Agent	MARIE L RISSELIN		
	4400 EVERGREE	N FOREST LOOP	
	(Florida stree	et address)	
New Registered Office Address:	KISSIMMEE	, Florida_34758	_
	(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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 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> <u>John</u>	Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u> y	/ Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	TREA	SWANN RISSELIN	2133 SW 101 LANE
Add ✓ Remove			MIRAMAR, FL 33025
2) Change	SECR	SWANN RISSELIN	2133 SW 101 LANE
✓ Add Remove			MIRAMAR, FL 33025
3) Change	<u>V</u>	EMMANUEL METELLUS	11207 LAUREL BROOK C
✓ Add Remove			RIVERVIEW, FL 33569
4) Change			
Add Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

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)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	

Effective date if applicable: JANURAY 1, 2015 (no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
. ()	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated MARCH 1, 2015	
Signature	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other con appointed fiduciary by that fiduciary)	ırt
MARIE L RISSELIN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	