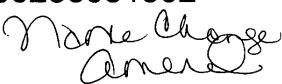
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BP 12/12

## **COVER LETTER**

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Northcliffe Apartments INC
DOCUMENT NUMBER: <u>\$\frac{120006}{425}80</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Donald Whiting.  Name of Contact Person  1
Northcliffe Apartments, LNC.
2415 Olar Court
Spring Hill FL 34608  City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Donald Whiting at 352 686-2891  Name of Contact Person at 352 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 Certified Copy (Additional copy is enclosed)  \$35 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

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	Articles of Ame	ndment ;		. DH 54 00
	Articles of Incor	poration	HUL SING	PM 500
N 11 1: A	t of	1 -	LUID	ARY OF STATE ASSEE, FLORID!
NorThCliff H	<u>partmen</u>	15,11	1 C SECHEL	ASSEE, L
(Name of Corporation as curren	tly filed with the Flor	ida Dept. of Sta	te) ALL	
<u> </u>			No. 7	·
(Document Numb	er of Corporation (if ki	nown)		
Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation:	orida Statutes, this Flo	prida Profit Corp	ooration adopts t	he following amendment(s)
A. If amending name, enter the new name of the	he corporation:	i .		
Northelice A	partmen	to In	$\mathcal{C}$	The new
name must be distinguishable and contain the	word "corporation,"	"company," or	"incorporated	" or the abbreviation
"Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	Corp." "Inc." or "Co	". A profession	al corporation i	name must contain the
		· \	$\wedge$	
B. Enter new principal office address, if applied (Principal office address MUST BE A STREET			<u> </u>	
(Francipul Office address MCST BE A STREET	ADDRESS )			
		1		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	F ROX)	ALIA		
, , , , , , , , , , , , , , , , , , , ,	<u>- 123,771</u> /	12	<del> </del>	
				<del></del>
				<del></del>
D. If amending the registered agent and/or reg	gistered office addres:	s in Florida, ent	er the name of t	the
new registered agent and/or the new registe				
Name of New Registered Agent	NIA			
			<del></del>	
·	(Florida street	address)		
No Burn 1000 444	·	,	F1 11	
New Registered Office Address:	(City)		_, Florida /2	Lip Code)
New Registered Agent's Signature, if changing	Registered Agent:			*.*
I hereby accept the appointment as registered ago	ent. I am familiar witi	h and accept the	obligations of th	e position.
	40			
Signature	of New Rogistered Age	int if chanaina		

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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<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			

stach additional sheets, if necessary). (Be specific)	iere:	
		<del></del>
		"-
·		
	or cancellation of issued shares,	
<u>f an amendment provides for an exchange, reclassification</u> provisions for implementing the amendment if not contain	ea in the amenament itsen:	
f an amendment provides for an exchange, reclassification provisions for implementing the amendment if not contain (if not applicable, indicate N/A)	ed in the amendment itsen:	
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	ed in the amendment usen:	

The date of each amendment(s) add	option: 6-8-12
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
The amendment(s) was/were appromuss be separately provided for e	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
action was not required.	oted by the board of directors without shareholder action and shareholder oted by the incorporators without shareholder action and shareholder
Dated	e-8.12
Signature A	ell R whi
selected,	rector, president or other officer Aif directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court diductory by that fiductory)
· ·	Donald Whiting
	(Typed or printed name of person signing)
	Pres
_	(Title of person signing)