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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SOUTHER DOCUMENT NUMBER: P120000592		ALF INC
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
MATTHEW SUT	ERS	
	Name of Contact Perso	n
	Firm/ Company	
417 BULLARD F	PKWY	
	Address	
TAMPA FL 3361	17	
	City/ State and Zip Cod	e
MJSFSUTB@GMAI	LCOM	
	used for future annual report	notification)
`		,
For further information concerning this matter, plea	ase call:	
MATTHEW SUTERS	at (850	, 559-2543
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

to

OT		
SOUTHERN ELEGANCE ALF INC		
(Name of Corporation as currently filed with the Fl	orida Dept. of State)	
P12000059205		
(Document Number of Corporation (if	known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following ar	nendment(s)
A. If amending name, enter the new name of the corporation:		
	Th	ie new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must con	eviation tain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
•		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	19248 PHILLIPS ROAD	
	BROOKSVILLE FL 34604	
D. If amending the registered agent and/or registered office address:		
Name of New Registered Agent	يه فرق م	
(Florida stre	eet address)	3 5 7
New Registered Office Address: (City)	Florida (Zip Code)	28
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		AN 8: 19

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	David R. Toney	2515 Landover Blvd
Add			Spring Hill FL 34608
Remove			
2) Change	Р	Matthew Suters	417 Bullard Pkwy
Add			Tampa FL 33617
Remove 3) Change Add	<u>v</u> f	LINDA TUCKER	19248 Phillips Rd Brooksville, FL. 34604
Remove 4) Change Add Remove			
5) Change			
Remove 6) Change Add Remove			

Ī	f amending or adding additional Articles, enter change(s) here:
(/	Attach additional sheets, if necessary). (Be specific)
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ľ	f 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)
	(i) not applicable, thatcale WA)
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The date of each amendment(s) adoption: BCTOBER 28, 2015, if other date this document was signed.	than, the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature Matthew Auters	
(By a director, president or officer - if directors or officers have not been	
selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Matthew Suters	
(Typed or printed name of person signing)	
Personal Representative - President	
(Title of person signing)	