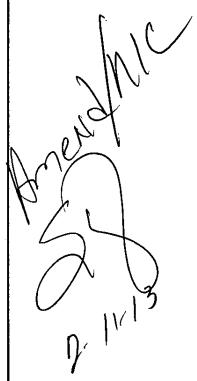
P/2000 77/13

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Office Use Only



200244231032

02/08/13--01016--008 **52.50





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: SOUTH	ERN FIORID	A HOUSING DEV	Elopeneni,
DOCUMENT NUMB	er: <u>\$120 000</u>	77113		INC.
The enclosed Articles of	If Amendment and fee are su	abmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
		Address Address Ct 33 61 City/ State and Zip Code	elupmont, Inc.	
For further information MiRANDA	concerning this matter, pleas	.	3216462	
	Contact Person	Area Cod	de & Daytime Telephone Number	-
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (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		
	<u> </u>			

Articles of Amendment to Articles of Incorporation

Floring Minority Housin, AND URBAN DEVELOPMENT, FINC, (Name of Corporation as currently filed with the Plorida Dept. of State)
0120 ODO 771/3
(Document Number of Corporation (if known)
(Document Number of Corporation (in known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Southern Florida Housing Development Inc. The new name must be distinguishable and contain the word corporation," "company," or "incorporated" or the abbreviation
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association." or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
NORTH MIAMI
FL 33161
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) DODO NE WY AVE
North MIAM;
FL, 33161
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent ENOCH MILEY
12620 NE 14th AVE (Florida street address)
New Registered Office Address: X/UDLI MIAMI, Florida 33/6/2 9
- (City)
•• •
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.

Page 1 of 4

Signature of New Registered Agent, if changing

(Same)

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	$\underline{\mathbf{V}}$	Mike Jones
X Add	<u>sv</u>	Sally Smith
Type of Action (Check One)	<u>Title</u>	Name Address
1) Change		_
Add		
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		· —
Remove		
4) Change		
Add		
Remove	/	
5) Change		
Add	T	
Remove		
O Char		
6) Change		
Add		
Remove		

ach additional sheets	~ // ~ // ·	<u>e_</u>
<u>,</u>		
		
	$\sim \Lambda \cdot n \Lambda \cdot \Lambda$	
	-) # +	
n amendment provi	ides for an exchange, reclassification, or cancellation of issued shares, nenting the amendment if not contained in the amendment itself:	
(if not applicable,	indicate N/A)	
	— N/H	
		
· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) ad	loption: 2/5/13
Effective date if applicable:	(no more than 90 days after amendment file date)
	ino more than 20 days after amenament five dates
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved 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	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
action was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
Dated	45/13
Signature	noch Milien
	irector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court
	ted fiduciary by that fiduciary)
	REV: ENOCH MILIEN C (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	CED Froch Wilien
	(Title of person signing)