D13000027497

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C. CARROTHERS

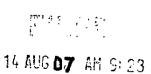
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Lakeview Associated Enterprises, Inc. DOCUMENT NUMBER: P13000027497	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Donald Wilkerson	
Name of Contact Person	
Lakeview Center, Inc.	
Firm/ Company	
1221 West Lakeview Avenue	
Address	
Pensacola, Florida 32501	
City/ State and Zip Code	
donald.wilkerson@bhcpns.org	
E-mail address: (to be used for future annual report notification)	
E-man address. (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Donald Wilkerson at (850) 469-3711	
Name of Contact Person 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 Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)	
Mailing Address Street Address	
Amendment Section Amendment Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of



(Name of Corporation as currently filed with the Florida Dept. of State)

W Associated Enterprises, Inc. P13000027497 Lakeview Associated Enterprises, Inc.

nent(s) to

(Document Number of Corporation (i	f known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amend	lme
A. If amending name, enter the new name of the corporation:		
Lakeview Associated Enterprises-Phase I	l, Inc.	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "word "chartered," "professional association." or the abbreviation "	n," "company," or "incorporated" or the abbreviat "Co". A professional corporation name must contain	ion
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
•		
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address	ress in Florida, enter the name of the	
Name of New Registered Agent N/A	_	
Haine of New Registered Agent	-	
(Florida str	reet address)	
Non Parintaged Office Address	F1	
New Registered Office Address: (City)	, Florida (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v		
Signature of New Registered	Acont 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	V	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		N/A	
Add			
Remove			
2) Change		N/A	<u> </u>
Add			
Remove			
3) Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			

(Attach addi	or adding additional Articles, enter tional sheets, if necessary). (Be specified)	change(s) nere: fic)
/A		,
		, , , , , , , , , , , , , , , , , , , ,
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16	land and the second	
provisions	for implementing the amendment if a	assification, or cancellation of issued shares, not contained in the amendment itself:
(if not	applicable, indicate N/A)	The same report to the same repo
/A		

deta this decomment was simed	10ption;	, if other
date this document was signed.		
Effective date <u>if applicable</u> :	08/06/2014 (no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	proved 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)	
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 08/06/20	014	
Signature	irector president or other officer – if directors or officers have not been	
selecte	d, by an incorporator – if in the hands of a received trustee, or other court ted fiduciary by that fiduciary)	
	Gary L. Bembry	
	(Typed or printed name of person signing)	
	President/CEO	
	(Title of person signing)	