## P140000025640

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SIVISION OF CORPORATIONS

JUN - 8 2016

**CLEWIS** 

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ON: Grace	Manor W 25640	loods	itre.	
DOCUMENT NUMBER The enclosed Articles of A					
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Please return all correspon	dence concerning this man	tter to the following:			
	7	essica M			
	<u> </u>	Name of Contact Pe	erson		
	Gracen	Nanor Woo	<del>ds万</del>	<b>C</b> ,	
	DOR	Manor Woo Firm/ Company ox 7667	•		
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		City/ State and Zip C	Code		
	billsw# E-mail address: (to be us	ne act.	DM		
	E-mail address: (to be us	ed for future annual rep	ort notific	ation)	
For further information co	ncerning this matter, pleas	e call:			
Jessica	m. Hali	at (	3	602.9015	
Name of C	ontact Person		Code & D	aytime Telephone Number	-
Enclosed is a check for the	e following amount made p	payable to the Florida D	Department	of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee of Certified Copy (Additional copy is enclosed)	Co Co (A	2.50 Filing Fee ertificate of Status ertified Copy dditional Copy enclosed)	
Amendn Division P.O. Bo:	Address nent Section of Corporations x 6327 see, FL 32314	Am Div Clii 266	fton Buildi	ection orporations ng ve Center Circle	

**Articles of Amendment** Articles of Incorporation

2016 JUN -6 PM 2: 24

## P14 000025640 (Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation " word "chartered," "professional association," o	Corp," "Inc," or "Co". A profes.	The " or "incorporated" or the abbrevia sional corporation name must contain
B. Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>	eable:	N/A
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFIC</u>	<u> </u>	NIA
D. If amending the registered agent and/or renew registered agent and/or the new regist	ristered office address in Florida,	enter the name of the
D. If amending the registered agent and/or re	ristered office address in Florida,	enter the name of the
D. If amending the registered agent and/or renew registered agent and/or the new regist	ristered office address in Florida,	enter the name of the
D. If amending the registered agent and/or renew registered agent and/or the new regist	eistered office address in Florida, ered office address:	enter the name of the

If amending the Officer's 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.

Mike Jones, V as Remo	ove, and Sally	y Smith, SV as an Add.	
Example: X Change	PT	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	VD	Jessica M. Hall	5105 lakeland Highlands Be Lakelana, Fi 33/8/3
<b>X</b> Add			Lakelana, Fi 33/8/3
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			<u> </u>
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additi	or adding additional onal sheets, if necessa	Articles, enter cha ary). (Be specific)	ange(s) here:			
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f an amendr	ient provides for an	exchange, reclassi	fication, or cance	<u>ellation of issued</u>	shares,	
provisions f	or implementing the oplicable, indicate N/	amendment if not	contained in the	amendment itse	<u>lf:</u>	
(ij noi a <sub>l</sub>	рисавіе, іпаісаів мл	<b>A</b>				
		NA				
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The date of each amendment(s) ac	Joution.	SECRETARY OF STATE
date this document was signed.	toption:	
Effective date if applicable:		2016 JUN -6 PM 2: 24
	(no more than 90 days after amen	dment file date)
Note: If the date inserted in this be document's effective date on the De		ing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes flicient for approval.	cast for the amendment(s)
	roved by the shareholders through voting group each voting group entitled to vote separately or	
	for the amendment(s) was/were sufficient for ap	proval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without sharehold	der action and shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder a	ction and shareholder
Dated	0/2/16	
Signature	Voris W. Ellsworth	<u>~</u>
selecte	rector, president or other officer – if directors of, by an incorporator – if in the hands of a received fiduciary by that fiduciary)	
	Doris W. Elisw	
	(Typed or printed name of person signature)	gning)
	President	
	(Title of person signing)	