P140000042485

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SECRETARY OF STATE
OF LANGSEF FOR ORIGINAL CHARSES FOR INCIDENTAL CONTRACTOR OF THE CONTRACTOR OF THE

C. LEWIS

JUN 6 2014

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corpo	orations					
NAME OF CORPOR	RATION: JBR HOME	S INC.				
	BER: P1400004248					
The enclosed Articles	of Amendment and fee are sub	omitted for filing.				
Please return all corre	spondence concerning this mat	ter to the following:				
	RUBEN D. TORO					
		Name of Contact Person				
	RUBEN TORO P					
	Firm/ Company					
	7901 KINGSPOINTE PKWY SUITE 31					
	Address					
	ORLANDO FL 32819					
		City/ State and Zip Code	;			
rub	encpa@bellsouth	.net				
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
RUBE D. TORO		at (407	370-6445			
Name	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department of State:						
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address		Street Address				
Amendment Section Division of Corporations		Amendment Section Division of Corporations				
). Box 6327	Clifton Building				
Tallahassee, FL 32314 '-2661 Executive Center Circle Tallahassee, FL 32301						
		1 2112113	13500, 1 L 24201			

APPAKOVEU AND FILED

Articles of Amendment to Articles of Incorporation of

14 MAY 23 AM 11: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JBR HOMES INC. (Name of Corporation as currently filed with the Florida Dept. of State) P14000042485 (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 its Articles of Incorporation: A. If amending name, enter the new name of the corporation: JRB HOMES INC. 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." 14353 FREDRICKSBURG DR. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) APT. 901 ORLANDO FL 32837 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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 (Florida street address) New Registered Office Address: , Florida (City) (Zip Code) 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,

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	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	DVP	LIZ M. DIAZ	14353 FREDRICKSBURG
✓ Add			APT. 901
Remove			ORLANDO FL 32837
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			Note that the second of the se
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary).	(Be specific)			
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f an amendment	provides for an excl	nange, reclassif	ication, or canc	ellation of issue	d shares,
provisions for im (if not applic	nplementing the ame able, indicate N/A)	ndment if not c	ontained in the	amendment its	<u>elf:</u>
	_				
	-				
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	- 1123				
					



The date of each amendment(s) adoption: 05/19/201	4 14 MAY 23 AM 11:01	, if other than the
date this document was signed.	SECRETARY OF STATE TALLAHASSEE, FLORIDA	,
Effective date if applicable: (no more	than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE		
The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	rs. The number of votes cast for the amendment(s)	
The amendment(s) was/were approved by the sharehold must be separately provided for each voting group enti	ers through voting groups. The following statement tled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) v	vas/were sufficient for approval	
by	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
by(voting group)		
The amendment(s) was/were adopted by the board of di action was not required.	rectors without shareholder action and shareholder	
The amendment(s) was/were adopted by the incorporate action was not required.	ors without shareholder action and shareholder	
Dated 65/20/14		
Signature	er officer – if directors or officers have not been	
selected, by an incorporator — appointed fiduciary by that fid	if in the hands of a receiver, trustee, or other court	
Josue R. Botero		
(Тур	ed or printed name of person signing)	
President		
	(Title of person signing)	_