P14000066184

(Re	equestor's Name)	
(Ac	ldress)	
(A)	idress)	
(AC	iuless)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT_	MAIL
(Bu	siness Entity Nar	ne)
(,	,
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200266911862

12/01/14--01047--002 **35.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

C.L. 9-14

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: SUMME	R TIME ALF	INC.		
DOCUMENT NUMB	er: <u>P140000</u>	00184			
The enclosed Articles of	of Amendment and fee are su	omitted for filing.			
Please return all corresp	pondence concerning this mat	ter to the following:			
_	Sheryl Bongolan				
		Name of Contact Person	ı		
-	Summer Time ALF, Inc. Firm/Company				
-	909 N. Wymore Road				
		Address			
-	Winter Park, Florida 32789 City/ State and Zip Code				
		City/ State and Zip Code			
	е	mryap @ ani	. com		
	E-mail address: (to be us	.mryap @ a01	notification)		
,					
For further information concerning this matter, please call:					
Sheryl	Bongolan	aı (407	<u> </u>		
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S \$35 Filing Fcc	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fcc Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>Mail</u>	Mailing Address Street Address				
Amendment Section Amendment Section					
	Division of Corporations Division of Corporations				
P.O. 1	Box 6327	Clifton	Building		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



SUMMER TIME ALF, IN	
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
<u>P14000066184</u>	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Clorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	AL
	The 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 contain the
B. Enter new principal office address, if applicable: N/A (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	
Name of New Registered Agent	·
(Florida stre	et 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 w Signature of New Registered Agent	ith and accept the obligations of the position.

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)	<u>Title</u>	Name	<u>Addres</u> s
Change Add Remove	D	Jeremiah Valdez	909 N. Wymore Road Winter Park, FL 32789
2) Change Add Remove	D	Yvonne Romero	909 N. Wymore Road Winter Park, FL 32789
Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

tach additional sheets, if necessary).	(Be specific)		
	· · · · · · · · · · · · · · · · · · ·		
	- · · · · · · · · · · · · · · · ·		
			······································
f an amendment provides for an excl	ange reclassification (or cancallation of issued sha	FOE
provisions for implementing the ame			AIN
(if not applicable, indicate N/A)			, , .
			• 40

The date of each amendment(date this document was signed.	s) adoption:			UNIZION OF	RY OF STATE CORPORATION	
Effective date if applicable:	Nov. 3,		n 90 davs after o		-1 PH 2:5"	<u> </u>
		ino more inar	i 90 aays ajter t	imenameni _, jiie	aate)	
Adoption of Amendment(s)	(<u>CHE</u>	CK ONE)				
The amendment(s) was/were by the shareholders was/we			The number of v	otes cast for the	e amendment(s)	1
The amendment(s) was/were must be separately provided						nt
"The number of votes	cast for the amend	lment(s) was/v	vere sufficient fe	or approval		
by	(voti)	 		**		
	(votii	ng group)				
The amendment(s) was/were action was not required.	e adopted by the b	oard of directo	ors without share	eholder action a	and shareholder	
The amendment(s) was/were action was not required.	e adopted by the ir	ncorporators w	rithout sharehold	der action and s	hareholder	
DatedN	0V. 3, 201	4				
Signature	Sherela	Boncala	J			
(B ₁	v a director, presid					
sci ap	ected, by an incor pointed fiduciary l	porator – if in by that fiducian	the hands of a r ry)	eceiver, trustee	, or other court	
		She	ryl Bo	ngolan		
		(Typed o	r printed name	ot përson signir	ıg)	
			resider			
		(Title of person :	signing)		