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COYER LETTER

TO: Amendment Section Division of Corporations The Savoy of Brevard, Inc. NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Kathleen Van Meir Name of Contact Person Mosley & Wallis, P.A. Firm/ Company 1221 E. New Haven Ave. Address Melbourne, FL 32901 City/ State and Zip Code kathiv@m-wlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kathi Van Meir Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■\$43.75 Filing Fee & \$52.50 Filing Fee ■ \$35 Filing Fee ■\$43.75 Filing Fee & Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassec, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

The Savoy of Brevard, Inc.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P14000099690	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
The Duval of Brevard, Inc.	The new
name must be distinguishable and contain the word "corporation," "c. "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2020 5
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the 22
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 we	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	uez	
_X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		*		
Remove				
110111010				

	cles, enter change(s) here: (Be specific)	
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If an amendment provides for an exch	ange, reclassification, or cancellation of issu	ied shares.
provisions for implementing the ame	ange, reclassification, or cancellation of issuadment if not contained in the amendment i	ed shares, tself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issuadment if not contained in the amendment	ed shares, tself:
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The date of each amenda	nent(s) adoption:	, if other than th
date this document was sig	ened.	
Effective date <u>if applicab</u>	le:	
	(no more than 90 days after amendment file date)	
	in this block does not meet the applicable statutory filing requirements on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment	(s) (<u>CHECK ONE</u>)	
The amendment(s) was action was not required	were adopted by the incorporators, or board of directors without shareho	older action and shareholder
• • • • • • • • • • • • • • • • • • • •	were adopted by the shareholders. The number of votes cast for the ames/were sufficient for approval.	endment(s)
	were approved by the shareholders through voting groups. The following vided for each voting group entitled to vote separately on the amendment	
"The number of v	otes cast for the amendment(s) was/were sufficient for approval	
by	,n	
	(voting group)	
Dated	6/3/20	
C:		
A Signature	(By a director, president or other officer – if directors or officers have n selected, by an incorporator – if in the hands of a receiver, trustee, or of appointed fiduciary by that fiduciary)	
	William M. Braselton, III	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	