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COVER LETTER

TO: Amendment Section Division of Corporations						
NAME OF CORPORATION:	LAN	Dunark (-inc	Homes	INC	, · •
NAME OF CORPORATION:		15 0000				
DOCUMENT NUMBER:	··	12 0000	<u> 38800</u>	7	-	
The enclosed Articles of Amend	iment and fee are subm	nitted for filing.				
Please return all correspondence	concerning this matte	r to the following:				
	Joseph Landma	Name of Contact Person	S T	Homes, 7	u,	•
		Firm/ Company		,	.	*
, , , , , , , , , , , , , , , , , , , 		Address	. 1 -3:	·····		
	TALLA	BOX 122 Address	FI.	32317		
		City/ State and Zip Coo	de			
لبيم	Aya lAn	dmark 1	FINE	homes a	Inc	. CUM
E-m	ail address: (to be used	for future annual repor	t notification)			
For further information concern	ing this matter, please	call:				
Joseph A	Cullen	B at (850	5	09-5737		344
Name of Contact	Person	Area Co	ode & Daytim	e Telephone Number	2000 2000 2000 2000 2000 2000 2000 200	28 25 25
nclosed is a check for the follo	wing amount made pay	yable to the Florida Dep	partment of St	ate:	Y 23	
	3.75 Filing Fee & Intercept of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifica Certifie	ate of Status I Copy onal Copy	776 174 112	SH STATE OF STATE SHI GRANIONS
Mailing Addi			Address			
Amendment S			dment Section			
Division of Co	-		on of Corpora	itions		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle				

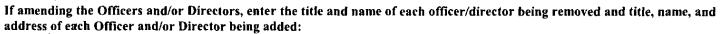
Tallahassee, FL 32301

Articles of Amendment

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Articles of Inco	orporation	
LAND MATEL	FINS Homes	INC
(Name of Corporation as currently	filed with the Florida Dept. of Sta	te)
CA DE CARRO	212 0000 388	00
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
•	E MN S	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 na	or the abbreviation
B. Enter new principal office address, if applicable:	= 1000	
(Principal office address MUST BE A STREET ADDRESS)	- XIVC	* 220
		30 O
C. Enter new mailing address, if applicable:	- Chung	S GGE
(Mailing address MAY BE A POST OFFICE BOX)	83	
		
D. If amending the registered agent and/or registered office addressed in the registered agent and/or registered agent a		<u> </u>
new registered agent and/or the new registered office address:		
Name of New Registered Agent	<u>/</u>	
	· / ME	
(Florida stre	et oddress	
New Registered Office Address:	, Florida	
	City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	ish and account the chlimations of the	
I hereby accept the appointment as registered agent. I am familiar w	un unu uccepi ine obligations of the f	osition.

Signature of New Registered Agent, if changing



(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 Remov		mith, SV as an Add.	should be holed as some boe, 11 as a change,
Example: X Change	<u>PT</u> Jol	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) V Change Add	P	Tony R Hesten	141 old shell Pt Rd Crawfordville F132327
Remove			
2) Change Add	B	Joseph A Culling III	48 Kimberly LANG Crawfordville F1 32327
Remove 3) Change Add	<u>D</u>	SASO 5 CAllaghan	PO Box 1164 Cruw-funduille F1 32326
Remove			32526
4) Change Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

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(if not ap	plicable, indi	icate N/A)						
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days a	fter amendment file date)
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	tutory filing requirements, this date will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vote must be separately provided for each voting group entitled to vote separately.	
"The number of votes cast for the amendment(s) was/were suffici	ent for approval
by(voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without action was not required.	shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shar action was not required.	eholder action and shareholder
5/28/16	
Dated	
1. W 1000	
Signature (By a director, president or other officer – if d	irectors or officers have not been
selected, by an incorporator – if in the hands	
appointed fiduciary by that fiduciary)	
JASUN 3.	
(Typed or printed name of	person signing)
Présiden	
(Title of person	n signing)