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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	ORATION: Associated Homes	Inc.				
DOCUMENT NUM	P 95000056213					
	es of Amendment and fee are su	abmitted for filing.				
Please return all cor	respondence concerning this ma	atter to the following:				
	Paul Turscak					
		Name of Contact Person	<u> </u>			
	Associated Homes, Inc.					
		Firm/ Company				
	10380 SW Village Center Dr. #179					
		Address				
	Port St Lucie, Fl 34987					
		City/ State and Zip Code				
	Cigam2007@yahoo.com					
	E-mail address: (to be us	sed for future annual report	notification)			
For further informat	ion concerning this matter, plea	se call:				
Paul Turscak		at (<u>772</u>	_) 201-9295			
Name of Contact Person			de & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address 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

Associated Homes, Inc.				
(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of State)		
P 95000056213				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	7,1006, Florida Statutes, this	s Florida Profit Corporation adopts the following	ig amendme	nt(s) to
A. If amending name, enter the new r	name of the corporation:			
name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association.	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation A professional corporation name must contain"	_The new on "Corp.," in the word	
B. Enter new principal office address.	if applicable:	Associated Homes, Inc		
(Principal office address MUST BE A STREET ADDRESS)		10380 SW village Center Dr. #179		
		Port St Lucie, Fl 34987		
			-557	
C. Enter new mailing address, if apple (Mailing address MAY BE A POST			E	, <u>)</u>
(maining duaress <u>may be a rost</u>	<u>OFFICE BOX</u>)		- =	•
			РM	
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office add w registered office addres	Iress in Florida, enter the name of the s:	120 HAR 30 PM 4: 53	لايب .
	Paul Turscak	_		
Name of New Registered Agent	776 CW Carrier Lubra La	P.J., Civ. Fl 24000	-	
	776 SW Squire Johns La.		_	
	(r torida si	revi address)		
New Registered Office Address:		, Florida	<u> </u>	
		(City) (Zip C	Lode)	
New Registered Agent's Signature, if c	hap ging Registered Agen	t:		
I hereby accept the appointment as regis	ered agent. I am familiar	with and accept the obligations of the position.		
	Saul T.	Misah		
	Signature of New I	Registered 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)

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 Doc 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	$\overline{\mathbf{b}}$	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) X Change	P	Paul Turscak	776 SW Squire Johns La
Add			Palm City, Fl 34990
Remove			
2) X Change	VP	Jeremy Turscak	507 SE Felix Ave
Add			Port St Lucie, Fl, 34984
Remove 3) Change	_		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	l sheets, if necessary).	(Be specific)			
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<u>f an amendment</u>	t provides for an exch	iange, reclassific	ation, or cancella	ion of issued sha	res,
<u>provisions for</u> in	nplementing the ame rable, indicate N/A)	ndment if not co	ntained in the am	endment itself:	
	une, mateate (V/A)				
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The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	<u>, </u>
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	vill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☑ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	und shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 3/20/200 Signature Sull / Musican	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Title of person signing)	