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The Commonwealth of Massachusetts William Francis Galvin

Minimum Fee: \$100.00

Secretary of the Commonwealth, Corporations Division One Ashburton Place, 17th floor Boston, MA 02108-1512 Telephone: (617) 727-9640

Certificate of Amendment

(General Laws, Chapter)

Federal Employer Identification Number: 001060545 (must be 9 digits)

The date of filing of the original certificate of organization: 9/6/2011

1.a. Exact name of the limited liability company: MYRTLE VILLAGE, LLC

1.b. The exact name of the limited liability company as amended, is: MYRTLE VILLAGE, LLC

2a. Location of its principal office:

No. and Street: MYRTLE BAPTIST CHURCH

21 CURVE STREET

City or Town: NEWTON State: MA Zip: 02465 Country: USA

3. As amended, the general character of business, and if the limited liability company is organized to render professional service, the service to be rendered:

THE GENERAL CHARACTER OF THE BUSINESS OF THE COMPANY IS TO PURCHASE REAL ESTATE AT OR ADJACENT TO 12-20 CURVE STREET, NEWTON; TO ACQUIRE, DEVELOP, CONSTRUCT, OWN, MANAGE, OR SELL A PROJECT OF LOW AND MODERATE INCOME HOUSING AS DEFINED BY G.L.C. 40B SECTION 21 ET SEQ.; TO BORROW MONEY OR RECEIVE GRANTS OR ENDOWMENT FUNDS FOR THE CREATION OF HOUSING FOR PERSONS OF LOWER OR MODERATE INCOME AND TO QUALIFY AS A LIMITED DIVIDEND ORGANIZATION UNDER 760 CMR 56.02.

- 4. The latest date of dissolution, if specified:
- 5. Name and address of the Resident Agent:

Name: <u>HOWARD HAYWOOD</u>

No. and Street: MYRTLE BAPTIST CHURCH

21 CURVE STREET

City or Town: <u>NEWTON</u> State: <u>MA</u> Zip: <u>02465</u> Country: <u>USA</u>

6. The name and business address of each manager, if any:

Title	Individual Name	Address (no PO Box)
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code
MANAGER	SHELBY ROBINSON	MYRTLE BAPTIST CHURCH, 21 CURVE STREET NEWTON, MA 02465 USA

7. The name and business address of the person(s) in addition to the manager(s), authorized to execute documents to be filed with the Corporations Division, and at least one person shall be named if there are no managers.

Title	Individual Name	Address (no PO Box)
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code
SOC SIGNATORY	HOWARD HAYWOOD	MYRTLE BAPTIST CHURCH, 21 CURVE STREET NEWTON, MA 02465 USA
SOC SIGNATORY	SHELBY ROBINSON	MYRTLE BAPTIST CHURCH, 21 CURVE STREET NEWTON, MA 02465 USA

8. The name and business address of the person(s) authorized to execute, acknowledge, deliver and record any recordable instrument purporting to affect an interest in real property:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code
REAL PROPERTY	HOWARD HAYWOOD	MYRTLE BAPTIST CHURCH, 21 CURVE STREET NEWTON, MA 02465 USA
REAL PROPERTY	SHELBY ROBINSON	MYRTLE BAPTIST CHURCH, 21 CURVE STREET NEWTON, MA 02465 USA

9. Additional matters:

- 10. State the amendments to the certificate:
- <u>6. THE NAME AND BUSINESS ADDRESS OF EACH MANAGER, IF ANY: SHELBY ROBINSON MYRTLE BAPTIST CHURCH, 21 CURVE STREET, NEWTON, MA 02465 USA</u>
- 11. The amendment certificate shall be effective when filed unless a later effective date is specified:

SIGNED UNDER THE PENALTIES OF PERJURY, this 29 Day of June, 2012, <u>HOWARD HAYWOOD</u>, Signature of Authorized Signatory.

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THE COMMONWEALTH OF MASSACHUSETTS

I hereby certify that, upon examination of this document, duly submitted to me, it appears that the provisions of the General Laws relative to corporations have been complied with, and I hereby approve said articles; and the filing fee having been paid, said articles are deemed to have been filed with me on:

June 29, 2012 12:45 PM

WILLIAM FRANCIS GALVIN

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Secretary of the Commonwealth