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Phone : (305)599-0839 Fax Number : (305)716-0346 2009 SEP 25 PH 2: 5
SECRETARY OF STATE
TALLAHASSEE, FI CALL

COR AMND/RESTATE/CORRECT OR O/D RESIGN

WOODBRIDGE REALTY LIMITED, INC.

MECENYER

109 SEP 25 AM 8: 00

SECRETARY OF STATE

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Articles of Amendment to Articles of Incorporation 2009 SEP 25 PM 2: 57
TALLAHASSEE, EL JAIE

	Articles of In- of		TALLAHASSE	OF 00
WOODBRIDG	E REALTY L	IMITED, INC.		E, FLORID.
(Name of Corneration as	nrrently (iled with	the Florida Dept.	of State)	· · · · · · · · · · · · · · · · · · ·
	09000079479)		
(Document	Number of Corpora	tion (if known)		
Pursuant to the provisions of section 607 amendment(s) to its Articles of Incorporation	.1006, Florida State on:	ites, this <i>Florida Pi</i>	rofit Corporation at	lopts the following
A. If amending name, enter the new man	ne of the corporati	<u>)D:</u>		
WOODBRID	GE REALTY FL	ORIDA, INC.		The new
name must be distinguishable and control abbreviation "Corp.," "Inc.," or Co.," or name must contain the word "chartered."	in the word "cur the designation "C	poration," "compai	a" A professional	
B. Enter new principal office address, if Principal office address <u>MUST BE A ST</u>		N/A - SAME	¥ 1-1%	_
C. Enter new mailing address, if application (Mailing address MAY BE A POST Of	i <u>blez</u> FFICE BOX)	.N/A.:SAME		
D. If amending the registered agent and/ new registered agent and/or the new i			enter the name of	<u>-</u> <u>the</u>
Name of New Registered Agent:	N/A- SAME			
	N/A			
New Registered Office Address:		ido strees address)		
	N/A		Florida N/A	
	(City)		(Zip Code)	
New Registered Agent's Signature, if tha	nging Registered A	heur:		
hereby accept the appointment as register	ed agent. I am fam	iliar with <mark>and accept</mark>	the obligations of th	te position.

Signature of New Registered Agent, if changing

	me the Officers and/or Directors and title, name, and address of e- iditional sheets, if necessary)	s enter the title and name of each officer and/or Director being add	er/director being led:
Title	Name	A distance	
		Address	Type of Action
	N/A - SAME		
			□ Remove
			Add Add
			□ Remove
N/A - SA	additional sheets, (f necassary). (
nrovisi	mendment provides for an excha ons for implementing the amend not applicable, Indicate N/A)	inge, reclassification, or cancellation coment if not contained in the amenda.	if issued shares, ont itself:
N/A - SAI	ME		
	<u> </u>		

The date of each amendment(s) adoption: SEPTEMBER 25, 2009	
Effective date if applicable: SEPTEMBER 25, 2009	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ic amendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each unling group entitled to vote separately on the amendment.	llowing statement dment(s):
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	sharcholder
Dated SEPTEMBER 25, 2009	
Signature (By awirector, president or other officer - if directors or officers has selected, by an incorporator - if in the hands of a receiver, trustee, appointed fideciary by that fiduciary)	
RENEE ADWAR,ESQ.	_
(Typed or printed name of person signing)	
(Title of person signing)	