

P11000075075

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

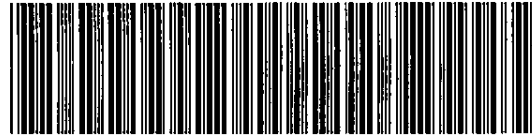
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Amend

11/28/11--01013--025 **35.00

FILED
2011 NOV 28 PM 12:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOE
11/30/11

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: American Home Realty of Naples, Inc.

DOCUMENT NUMBER: P110000075075

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa Palacios
Name of Contact Person

MP Accounting Services, Inc.
Firm/ Company

5270 Golden Gate Parkway Ste 105
Address

Naples, FL 34116
City/ State and Zip Code

MPAccountingtax@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Palacios at 239-331-8718
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- ☒ \$35 Filing Fee
☐ \$43.75 Filing Fee & Certificate of Status
☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
☐ \$52.50 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

American Home Realty of Naples, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)

P110000075075

(Document Number of Corporation (if known))

FILED

2011 NOV 28 PM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5270 Golden Gate Pkwy
Suite 104
Naples, FL 34116

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

MP Accounting Services, Inc.

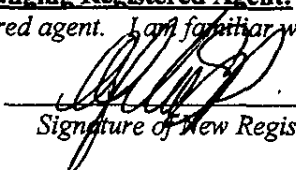
New Registered Office Address:

5270 Golden Gate Pkwy, Ste 105
(Florida street address)

Naples, FL 34116
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	Duenas, George	4670 St Croix Lane APT 1012 Naples, FL 34109	☐ Add ☒ Remove
VP	Ramos, OLGA	5270 Golden Gate Pkwy Ste 115 Naples, FL 34116	☐ Add ☒ Remove
P	Medina, Luis	5270 Golden Gate Pkwy Ste 104 Naples, FL 34116	☒ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
 (if not applicable, indicate N/A)

The date of each amendment(s) adoption: _____

11/23/11
(date of adoption is required)

Effective date if applicable: _____

(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 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 cast 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 and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated _____

Signature _____

(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)

Luis Medina

(Typed or printed name of person signing)

President, Owner

(Title of person signing)