P12000001399

(Re	equestor's Name)		
(Ad	ldress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
	WAIT	MAIL	
(Bu	siness Entity Nar	me)	
(Document Number)			
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer:		





100260375481

05/22/14--01007--016 **35.00



Mame Ch 8 (10 6.5.14

COVER LETTER

TO: Amendment Section Division of Corporations Max Kealty NAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: (Firm/ Company) na242@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$\Bigcup \$43.75 Filing Fee & \$\Bigcup \$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is Enclosed) **Street Address Mailing Address** Amendment Section Amendment Section **Division of Corporations Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

			•
•	Articles of Amendment	7/	11/2/
•	to Articles of Incorporation	1/3	ア 、
Team Max	Realty, I	Inc.	- My 11.
(Name of Corporation as currently filed wit	h the Florida Dept. of State)		8.9
(Document Num	ber of Corporation (if known)		_
•	•		
Pursuant to the provisions of section 617.1006, Floridamendment(s) to its Articles of Incorporation:	da Statutes, this <i>Floridu Not For Pr</i>	ofit Corporation adopts the	following
A. If amending name, enter the new name of the	corporation:		
Homeseller name must be distinguishable and contain the word	s Kealty,		_The new
"Company" or "Co." may not be used in the name.	corporation or incorporated of	r the aboreviation Corp.	or Inc.
B. Enter new principal office address, if applicab	عل ما 19ما	7th Way	
(Principal office address <u>MUST BE A STREET AD</u>		ImBeach.	FL 33407
			_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	ox 1.911.01097	tn Hay	-
	West Pal	m Beach	FL 3340
	MESTO	, 110 <u>000 1</u>	. 1 ~ 30 10
	.	*	_
D. If amending the registered agent and/or regist new registered agent and/or the new registered		er the name of the	
Name of New Registered Agent:			
	(Flank) - duran - duran)		
New Registered Office Address:	(Florida street address)		
		_, Florida	
	(City)	(Zip Code	2)
New Registered Agent's Signature, if changing Re			
I hereby accept the appointment as registered agent.	I am familiar with and accept the	obligations of the position.	

Page 1 of 4

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)

. .

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.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	<u>ones</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change Add Remove			·
2) Change Add			
Remove 3) Change			
Add			
4) Change Add Remove			
5) Change Add			
Remove 6) Change			
Add Remove			

. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)						
					* •	
-						
		100.00				·
					•	
				.=		
·		 .	· ···			
· 						
				***		· · ·
				:a :		
, ,, <u>,</u>						
		W-V				
	<u> </u>					

date this document was signed.	option:	, if other than the
Effective date if applicable:		
Effective date it applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad was/were sufficient for approva	opted by the members and the number of votes cast for the amendment(s) l.	
There are no members or membadopted by the board of director	pers entitled to vote on the amendment(s). The amendment(s) was/were ars.	
Dated 5	19/2014	
Signature	LIK JEAN	
(By the chair have not bee	man or vie chairman of the board, president or other officer-if directors on selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	
LIL IAI	NNA GIZYNSKI	
	(Typed or printed name of person signing) PRES/AFWT	
	(Title of person signing)	