

| (Re | equestor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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R. WHITE

COVER LETTER

| TO: Amendment Section Division of Corporations | | | | |
|---|---|--|--|--|
| NAME OF CORPORATION: Retail Construction Advisors Inc DOCUMENT NUMBER: P 14000064284 | | | | |
| The enclosed Articles of Amendment and fee are sub | | | | |
| Please return all correspondence concerning this matter to the following: | | | | |
| Jenniler N | Name of Contact Person | | | |
| | nuction Advisors | | | |
| refair carb | Firm/ Company | | | |
| 4517 Belkin | Court | | | |
| a landa (1 | Address | | | |
| Orlaras, FC | City/ State and Zip Code | | | |
| Jennifer & Classa developers. Com E-mail address: (to be used for future annual report notification) | | | | |
| For further information concerning this matter, please | e call: | | | |
| Jennifer Milburn | at (407) 440-4321 | | | |
| 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 & ☐ \$52.50 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

FILED

| and the second s | _ | · | | | |
|--|-------------------------|--------------------|----------------------|------------------------|---------------|
| Retail Construction Advisor | Inc | 14 | SEP 26 | AH 9: | 41 |
| (Name of Corporation as currently filed with the Fl | orida Dept. of State) | 1712 12 1712 12 | y late c | FSTAT | ii. |
| P14000064284 | | a aeu | anasse | : PLOM | 為 |
| (Document Number of Corporation (if | known) | | | | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this I its Articles of Incorporation: | Florida Profit Corport | ution ad | opts the foll | owing am | endment(s) to |
| A. If amending name, enter the new name of the corporation: | | | | The | · ? new |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Coword "chartered," "professional association," or the abbreviation "F | O' A professional o | incorpo corpora | rated" or t | ne abbre must conte | viation |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | N/A | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | | | | |
| D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address: | ess in Florida, enter t | he nam | e of the | | |
| Name of New Registered Agent Vida Scarp | ello Ave#4-A | | | | |
| (Florida streen New Registered Office Address: Canes New Registered Office Address: (City) | , | Florida_ | 32 (0 ((Zip Code | 25 | |
| New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent, I am familiar w | ith and accept the obl | igations | of the posit | ion. | |
| Vida Sear | belle | | • | | |
| Signature of New Pagistaned A | :C-Li | | | | |

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 | PT Joh | nn Doc | |
|----------------------------|----------------------|----------------|--|
| X Remove | <u>V</u> <u>Mi</u> | ke Jones | |
| X Add | <u>SV</u> <u>Sal</u> | lly Smith | |
| Type of Action (Check One) | <u>Title</u> | Name | Address |
| 1) Change Add | P | Vida Gulvinas | 1717 NW 23'd Ave #4-A |
| Remove 2) Change Add | P | Vida Scarpello | Gainesville, Fl 32605 1717 NW 23 de #4-4 |
| Remove 3) Change Add | | | Gamesille FL 32605 |
| Remove 4) Change Add | | | |
| Remove 5) Change Add | | | |
| 6) Change Add Remove | | | |

| If amending | g or adding additional Arti tional sheets, if necessary). | cles, enter change(s) here | : |
|---------------|--|------------------------------|---|
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| f an ameno | lment provides for an exch | ange, reclassification, or o | cancellation of issued shares. |
| provisions | for implementing the ame | ndment if not contained in | cancellation of issued shares. the amendment itself: |
| (if not | applicable, indicate N/A) | | |
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| The date of each amendment(s) adoption: | , if other than the |
|--|---------------------|
| date this document was signed. | |
| Effective date if applicable: 9/22/14 | |
| 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) | |
| (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 9/22/14 | |
| SignatureVeda Sampelle | |
| (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) President | _ |
| President (Title of person signing) | |
| I I INC OI DEISON SIRDINE I | |