P21000076496

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City/	/State/Zip/Phone	e #)
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PICK-UP	MAIT	MAIL
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(555)	moss Emily Hai	,
(5		
(DOC	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	





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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 10, 2021

BENJAMIM RE, PA 2080 MCGREGOR BLVD. SUITE 300 FORT MYERS, FL 33901

SUBJECT: BENJAMIM RE, PA Ref. Number: P21000076496

We have received your document for BENJAMIM RE, PA and check(s) totaling \$25.00. However, the document has not been filed and is being returned for the following reason(s):

There is a balance due of \$10.00. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a LLC, but your entity is a CORP. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

etter Number. 22

Letter Number: 221A00021886

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BENJAMIM RE. I	PA
DOCUMENT NUMBER: P21000076496	
The enclosed Articles of Amendment and fee are su	abmitted for filing.
Please return all correspondence concerning this made	atter to the following:
Augustin G. Simmons	
	Name of Contact Person
O'Halloran & Simmons, PLL	.c
	Firm/ Company
2080 McGregor Blvd., Suite 3	300
	Address
Fort Myers, FL 33901	
	City/ State and Zip Code
tbenjamin@viprealty.com	
E-mail address: (to be use	sed for future annual report notification)
For further information concerning this matter, pleas	se call:
Augustin G. Simmons	at (<u>239</u>) 204-9376
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

BENJAMIM RE. PA

filed with the Florida Dept. of State)
Corporation (if known)
Florida Profit Corporation adopts the following amendment(s) to
The new ompany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
77
ess in Florida, enter the name of the
et address)
Florida
City) (Zip Code)
Florida

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	<u>PT</u>	<u>John Do</u>	<u>oe</u>	
\underline{X} Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change		_		
Add				
Remove				
2) Change				
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		-		
Add				
Remove				
S) Change		_		
Add				
Remove				

F Ifan	ending or adding additional Articles, enter change(s) here:	
(Attai	h additional sheets, if necessary). (Be specific)	
(11111)		
···		
•		
F. If an	amendment provides for an exchange, reclassification, or cancellation of issued shares,	
pro	visions for implementing the amendment if not contained in the amendment itself:	
	(if not applicable, indicate NA)	
	11/A	
	· · · · · · · · · · · · · · · · · · ·	
		—

	08/26/2021	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		· ·-
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the l	block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareholder a	ction and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amendme sufficient for approval.	nt(s)
☐ The amendment(s) was/were a must be separately provided for	pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	rment
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
9/18/202 Dated	ı	
Signature	Ted A. Benj.	
(By a selec	director, president of other officer – if directors or officers have not been ted, by an incorporator – if it the hands of a receiver, trustee, or other cointed fiduciary by that fiduciary)	
	Ted A. Benjamin	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	11 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -