## 311121

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08/20/24--01019--005 \*\*35.00



## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: ST.AUGUSTINE	& ST. JOHNS COUNTY N	AULTIPLE LISTING SERV		
DOCUMENT NUM	311121				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	itter to the following:			
	JEANETTE LANGFORD				
		Name of Contact Persor	1		
	ST AUGUSTINE & ST JOH	NS COUNTY BOARD OF	REALTORS		
	<del> </del>	Firm/ Company			
	1789 LAKESIDE AVENUE				
		Address			
	ST AUGUSTINE FL 32084				
		City/ State and Zip Code	2		
	JEANETTE@STJOHNSRE	ALTORS.COM			
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	ion concerning this matter, pleas		242-6559		
Name	e of Contact Person	Area Co	) 242-6559 de & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ailing Address		Address		
	mendment Section		Amendment Section		
	vision of Corporations  O. Box 6327		n of Corporations entre of Tallahassee		
	llahassee, FL 32314		N. Monroe Street, Suite 810		

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation

ST.AUGUSTINE & ST. JOHNS COUNTY MULTIPLE LISTING SERVICE INC

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

(Name o	of Corporation as currently f	iled with the Florida Dept. of State)	
311121			
	(Document Number of C	orporation (if known)	•
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Fla	orida Profit Corporation adopts the following amendm	nent(s) to
A. If amending name, enter the new na	ame of the corporation:	The grant	
	Corp," "Inc," or "Co". A p	The ne npany, "or "incorporated" or the abbreviation "Corp., professional corporation name must contain the wor	
B. Enter new principal office address, (Principal office address MUST BE A S		<del> </del>	-
		202 Sign	,
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		#UG 20	:
	-		•
D. If amending the registered agent an new registered agent and/or the new		s in Florida, enter the name of the	•
Name of New Registered Agent	JEANETTE LANGFORD		
	1789 LAKESIDE AVENUE		
	(Florida street	address)	
New Registered Office Address:	ST AUGUSTINE	, Florida 32084	_
-	/Ci	ity) (Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar with	h and accept the obligations of the position.	
Check if applicable	Signature of New/Reg!	stered 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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oc</u>	
X Remove	<u>V</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Si	nith	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
i) Change	D	_	VICTOR RAYMOS	
Add X				
Remove 2) Change	DCEO	_	JEANETTE LANGFORD	1789 LAKESIDE AVE
X Add				ST AUGUSTINE FL 32084
Remove 3) X Change	P	<b>_</b>	GENE JOHNSON	CORRECTION -NAME IS
Add				TRANSPOSED ON FILING
Remove				
4) Change		_		<del> </del>
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				<del></del>
Remove				

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	ovides for an excl	hange, reclassificat	tion, or cancellation	of issued shares,	
f an amendment pr		endment if not con	tained in the ameno	lment itself:	
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The date of each amendment(s) adoption:, if other than date this document was signed.
date this document was signed.
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east 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)
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)  GENE JOHNSON
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)