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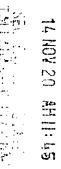
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DEC 02 2013

C. CARROTHERS

## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Cape HAZE REAlty INC dba Cape Haze INSUKANCE **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Placida Rd #7 E-mail address: (to boused for future annual report notification) For further information concerning this matter, please call: Susan K. Kiebler at (941), 697 2011

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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status 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

Certified Copy

(Additional Copy is enclosed)

## **Articles of Amendment**

## Articles of Incorporation of

Casa Mara Drailder Tia	ر شبط العام العام العام العام الع	<b>-</b>
CADE ITAZE REALTY LNC		
(Name of Corporation as currently filed with the Florida Dept. of Stat	<u>e</u> )	esti averi
623566		20
(Document Number of Corporation (if known)		Term Terminal
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corp</i> its Articles of Incorporation:	oration adopts the following	••
	1.34 2.34	بي. (به
A. If amending name, enter the new name of the corporation:		
	7	The new
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional association, "or the abbreviation "P.A."  B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  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, entenew registered agent and/or the new registered office address:		ntain the
Name of New Registered Agent		
(Floridu street address)		
New Registered Office Address:	_, Florida	
(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	<del></del>	

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change	S	KAREN K. Kieble	OR 411 17th Ave W.
Add Remove			Palmetto, FC 34221
2) Change	S	Susan K. Kieb	
Remove 3) Change	T	NANCY K. Kieb	Englewood, FC 34224
Remove  4) Change	I	Susmuk. Kieb	Englewood, FC34224
Remove			Englewood, FC 3422
5) Change			
Remove			<u> </u>
6) Change			
Add			
Remove			

macii aaaiiii///(II	dding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)
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·	
an amendment	provides for an exchange, reclassification, or cancellation of issued shares,
provisions for in	nplementing the amendment if not contained in the amendment itself:
(if not applic	cable, indicate N/A)

The date of each amendment(s) adoption: 11-18-14	, if other than the
date this document was signed.	
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 east for the amendment(s) was/were sufficient for approval	
by"	
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 Dusan K Kebler	
(By a director, president or other officer – if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
Susan K. Kiebler	
(Typed or printed name of person signing)	
President/owner	
(Title of person signing)	