625790

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phono	e #)
PICK-UP	☐ WAIT	MAIL.
(Bu	isiness Entity Nar	me)
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COVER LETTER

Division of Corporations NAME OF CORPORATION: REPLEY INC. 625790 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: PHTILICIA OPPEL
Name of Contact Person RUSEMULT REALTY INC. 5104 N. Orange Polowonk TIL #217 NLANDO FZ 32810

City/ State and Zip Code @ CFI. rv. com REALTOR PAT @ CFI. RR. CSM (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 716-7904 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 Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment to Articles of Incorporation of

Rosemont Realty	, Inc		
(Name of Corporation as current		pt. of State)	
625790	0 (18)		
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation	adopts the following ame	ndment(s) to
A. If amending name, enter the new name of the corporation:			
NIA		The	new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". 2 "chartered." "professional association," or the abbreviation "P.A."	A professional corporation	" or the abbreviation "Co	orp., "
B. Enter new principal office address, if applicable:	N/A		
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	,	E. 2	
		<u> </u>	
		<u> </u>	
C. Enter new mailing address, if applicable:	1. 1.	$\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$	Γ
(Muiling address <u>MAY BE A POST OFFICE BOX</u>)	<u>N/A</u>		
		<u>.</u>	
		- 5	
D. If amending the registered agent and/or registered office adding new registered agent and/or the new registered office address		nme of the	
	_		
Name of New Registered Agent N/A-			
(Florida str.	vet adaress)		
New Registered Office Address: N/A	//City)	_, Florida	
	к пу)	(24) Code)	
New Registered Agent's Signature, if changing Registered Agent:	<u>:</u>		
thereby accept the appointment as registered agent. I am familiar v	with and accept the obligation	ns of the position.	
N/A			
Signature of New Re	egistered 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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	<u>Y</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PST	Barbara Clement · Cox	608 Stetson St.
Add			Orlando FZ 32804
X Remove			
2) Change	<u> </u>	Patricia Oppel	7514 Duc Lake Dr.
X Add			Orlando FL 32810
Remove Change	_5T_	Alan Copel	7514 DUC LAKE DE
_ <u>X</u> _ Add			ORLANDO FZ 32810
Remove			
4) Change		·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			
		Page 2 of 4	
E. <u>If amending or add</u> (Attach additional sh	ling addition heets. if neces	nal Articles, enter change(s) here: ssary). (Be specific)	

_ <i>N/k</i>		
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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s)	(<u>CHECK ONE</u>)
★ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
• •	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval
by	······································
	(voting group)
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder
Dated Jak.	ara Clement Cox
Signature Bus	ara Clement. Cox
(By a dire selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court I fiduciary by that fiduciary)
_	Barbara Clement-Cox
	(Typed or printed name of person signing)
	PST
T)	itle of person signing)