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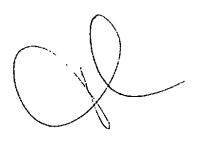
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: REAL ESTATE TRANSACTIONS, INC.		
DOCUMENT NUMBER: 661621		
The enclosed Articles of Amendment and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Name of Contact Person REAL ESTATE TRANSACTIONS, INC. Firm/ Company		
9401 COLUNS AVE, ADT 203		
Address		
SURFSIDE, FL 33154		
City/ State and Zin Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Name of Contact Person Name of Contact Person Area Code & Daytime Telephone Number		
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:		
S35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 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 the state of th
REAL ESTATE TAA	NSACTIONS, /NC.
(Name of Corporation as curren	tly filed with the Florida Dept, of State)
66	1621
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
SILVIA SABATE	J COLTRAVE, P. A. The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	9401 COLUNI AVE # 203
C. Enter new mailing address, if applicable:	SURFSIDE, FL 33154
(Mailing address MAY BE A POST OFFICE BOX)	#203
	SURFSIDE, FL 33154
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	dress in Florida, enter the name of the 555;
	518ATES COLTRANE
	LINS AVE +203
New Registered Office Address: 5ULFS	

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

(City)

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>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	NA	<u>Address</u>		
1) Change						
Add						
Remove					202	
2) Change					2022 NJG	.]
Add						, j 21
Remove Change						
Add					. e	
Remove						
4) Change						
Add				··-		
Remove						
5) Change						
Add					· · · - ·	
Remove					.	
6) Change						
Add						
Remove						

The date of each amendment(s) adoption: date this document was signed.	AUGUST	22	, 2022	, if other than the
Effective date if applicable:	(no more than 90 days o	after amenda	nent file date)	
Note: If the date inserted in this block does n document's effective date on the Department of		atutory filing	g requirements, this de	ate will not be listed as the
Adoption of Amendment(s) (CE	IECK ONE)			
The amendment(s) was/were adopted by the action was not required.	incorporators, or board o	f directors w	ithout shareholder acti	ion and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for		er of votes ca	ast for the amendment	(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting			•	ent
"The number of votes east for the ame	ndment(s) was/were suffi	cient for app	roval	
by(vol	ting group)			
Signature (By a director, pres selected, by an inco	2/3022 indent or other officer – if orporator – if in the hands by by that fiduciary)			<u>ее</u>
			ES COLTRAN	IE
	(Typed or printed name o		ing)	
	PLESIDEN (Title of person signing)	IT	<u>.</u>	
	(Title of person signing)			

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