## H26705

(Requestor's Name)				
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(Address)				
,				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
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SECRETARY OF STATE ON SECRETARY OF CORPORATIONS

OCT 1 2 2012

T. ROBERTS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: TROPICAL	REALTY & INV	ESTMENTS, INC
DOCUMENT NUMB	ER: H26705		
The enclosed Articles of	of Amendment and fee are sub	omitted for filing.	
Please return all corres	pondence concerning this mat	ter to the following:	
	Carol Graham		
•		Name of Contact Person	l
	Tropical Realty &		
•		Firm/ Company	
	9108 US Hwy 19		
•		Address	
_	Port Richey, FL 3		
		City/ State and Zip Code	•
cgra	aham@prutropica	l.net	
	E-mail address: (to be us	ed for future annual report	notification)
For further information	concerning this matter, pleas	e call:	
Carol Grahan	n	at (813	712-3837
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	urtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 chassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DIVISION OF CORPORATIONS

12 OCT | | AM 8: 36

## TROPICAL REALTY & INVESTMENTS, INC.

(Name of Corporation as currently filed wit		of State)		
H26705		_		
(Document Number of Corpor	ration (if known)		<del></del>	
Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation:	es, this <i>Florida Profi</i>	<i>t Corporation</i> adop	ots the following	; amendment(s) to
A. If amending name, enter the new name of the corporat	tion:			
				The new
name must be distinguishable and contain the word "cor," "Corp.," "Inc.," or Co.," or the designation "Corp," "Incword "chartered," "professional association," or the abbrev.	"," or "Co". A prof			
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRESS</u>	)			
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<del></del>			
			<u>.</u>	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a		a, enter the name	of the	
Name of New Registered Agent				
(Flo	orida street address)			
New Registered Office Address:		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registered	1 Agents			
I hereby accept the appointment as registered agent. I am fa	<u>r Agent:</u> amiliar with and acce	pt the obligations	of the position.	
Signature of New Regi	istered Agent, if chan	ging		

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:	e, ana sai	ty Smith, .	or us un Auu.			
X Change	<u>PT</u>	John Do	<u>e</u>			
X Remove	<u>V</u>	Mike Jo	<u>nes</u>			
X Add	<u>sv</u>	Sally Sn	<u>nith</u>			
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s	
1) Change	VP	_	Jisa	Eve Jozano	$\sim$ 1	15642
X Add					Clearust	ertL_
Remove						33766
2) Change		<del></del>				
Add					· · · · · · · · · · · · · · · · · · ·	
Remove						
3) Change		_				
Add						
Remove						
4) Change					<u> </u>	
Add						
Remove					*****	
5) Change		_				
Add						
Remove						
6) Change		<del>-</del>			·	
Add						
Remove						

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
<del></del>	
<del> </del>	
if an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption: 10-01-2012
Effective date if applicable: 10-01-2012
(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 cast for the amendment(s) was/were sufficient for approval
by"  (voting group)
(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 10-3-2012 4
Signature & Mully Hulle
(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)
D. Deway Mitchell
(Typed or printed name of person signing)
President
(Title of person signing)