

(Requestor's Name)	
(Address)	
(Address)	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	_
Certified Copies Certificates of Status	<i>-</i>
Special Instructions to Filing Officer:	
Office Use Only	

800316137248

03/17/16--01021--031 *+52.50

S TALLENT AUG 2 1 2018

19 AUG 17 PHI2: 11

Brand

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MAINLANDS	- LAKES REALTY In
DOCUMENT NUMBER: KO98	331
The enclosed Articles of Correction and for	
Please return all correspondence concerni	ng this matter to the following:
KEVIN L DVAIL Name of Contact Person	
Mainlands - Lailes	Realty, Inc
4501 - B MAINLAN	us Blug W
Pinellas Park F	L 33782
MAINLAKES & Ma. E-mail address: (to be used for future annual r	eport notification) Com
For further information concerning this m	atter, please call:
Kevin L Duvall Name of Contact Person	at (309) 329 - 8202
Enclosed is a check for the following amo	unt:
□ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status
☐ \$43.75 Filing Fee & Certified Copy	\$ \$52.50 Filing Fee, Certificate of Status & Certified Copy
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327	Street Address: Amendment Section Division of Corporations Clifton Building
Tallahaceee FL 32314	2661 Evecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of

MAINLANDS-LAKES Real	ty, Inc
(Name of Corporation as currently	filed with the Florida Dept. of State)
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	'o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	4501 - B MAINLANDS Blod U Pinelley PAPIL FL
	33782
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 addre	ss in Florida enter the name of the
new registered agent and/or the new registered office address:	ss in Plottua, enter the name of the
Name of New Registered Agent Kevin L.	Dura !
10851 43 St	N # 1004 Clearunter, FL 337
(Florida stree	t address)
New Registered Office Address:	, Florida
	πη (Στρ Cone)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
1.	Durall
Signature of Man Par	nictored 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.

Mike Jones, V as Remo Example:	ove, and Sally Smi	ith, SV as an Add.	
X Change	<u>PT</u> <u>John</u>	1 Doc	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One) 1)Change Add	Title	Kevij Durall	Address
Remove Change Add	<u>VP</u>	Gary Gray	
Remove 3) Change Add			
Remove 4) Change Add Remove			
5) Change Add Remove			
6) Change Add			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
MAINLANDS-LAKES REALTY, INC
Effective DATE 12-22-1987
DOMUMENT # K09831
Officer Director
KEVIN L DUVAIL replaces Mary ANN DUVE
The state of the s
Registères Agent
Kevin L Durall reflaces MARY Ann Dura
DShares (100%) were owned By TRUST Agreement & Mary AM (Exhi DMARY AND DUVELL DIED MAY 12 2018 (Exa)
DART AND DIED MAY IL ZOLE (Exhi
7 To - Design Towns I have be the To
3) TRUST Agreement DeviseD MAINLANDS-LAKES Realty In TO Kevin L Durall (TRUST Agreement Exhibit3)
1) Shares of MAINLANDS-LAKES Realty TAC were
TRansferres Dy TRUSTER TO Kevin I Duvall
Eu:0.+ 4
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
Shares of STOUR ENCLOSED
TRUST Agreement EnclosED DEATH CETTITICATE ENCLOSED
DEATH CETTIFICATE ENCLOSED

CERTIFICATE

TI-5:3-1

Common Moorestand Duvalli Trust. Coner Hundred ((100)) Sealth Coner Hundred (100) King to Mary Ann Duvall Trust

CHECKLE HER STEER TRUST AGREEMENT OF WARY, AND DUVATOL UND STEAM

and non-warded Paris of the Copied Lock of the above named Corporate Where My MAIN A CONE HUNDRED (4.00)

wanford Road gate Companies of the holles hory in horion or by dilly custory at the surrender of this Constitute programment

THIS DOCUMENT HAS A LIGHT BACKGROUND ON TRUE WATERMARKED PAPER.

Exhibit 2

BUREAU of VITAL STA.

CERTIFICATION OF DEATH

STATE FILE NUMBER: 2018082215

DATE ISSUED: MAY 23, 2018

DECEDENT INFORMATION

DATE FILED: MAY 22, 2018

NAME: MARY ANN DUVALL

DATE OF DEATH: MAY 11, 2018

SEX: FEMALE

AGE: 082 YEARS

DATE OF BIRTH: APRIL 23, 1936

SSN: 360-28-1710

BIRTHPLACE: STREATOR, ILLINOIS, UNITED STATES PLACE WHERE DEATH OCCURRED:

DECEDENT'S HOME

FACILITY NAME OR STREET ADDRESS: 9182 42ND WAY NORTH LOCATION OF DEATH: PINELLAS PARK, PINELLAS COUNTY, 33782

RESIDENCE: 9182 42ND WAY NORTH, PINELLAS PARK, FLORIDA 33782, UNITED STATES

COUNTY: PINELLAS

OCCUPATION, INDUSTRY: REAL ESTATE BROKER, REAL ESTATE

EDUCATION: SOME COLLEGE CREDIT, BUT NO DEGREE

EVER IN U.S. ARMED FORCES?NO

HISPANIC OR HAITIAN ORIGIN? NO. NOT OF HISPANIC/HAITIAN ORIGIN

RACE: WHITE

SURVIVING SPOUSE / PARENT NAME INFORMATION

(NAME PRIOR TO FIRST MARRIAGE, IF APPLICABLE)

MARITAL STATUS: WIDOWED SURVIVING SPOUSE NAME: NONE

GEÖRGE BALKE FATHER'S/PARENT'S NAME: MOTHER'S/PARENT'S NAME: MARY GALL

INFORMANT, FUNERAL FACILITY AND PLACE OF DISPOSITION INFORMATION

INFORMANT'S NAME: KEVIN L DUVALL RELATIONSHIP TO DECEDENT: NEPHEW

INFORMANT'S ADDRESS: 10851 43RD STREET NORTH, UNIT 1004, CLEARWATER, FLORIDA 33762, UNITED STATES

FUNERAL DIRECTOR/LICENSE NUMBER: HALLIE A. SHOEMAN, F045261 FUNERAL FACILITY: ALIFETRIBUTE FUNERAL CARE - LARGO F063607 716 SEMINOLE BLVD, LARGO, FLORIDA 33770

METHOD OF DISPOSITION: CREMATION

PLACE OF DISPOSITION: CREMATION TRIBUTE CENTER ST PETERSBURG, FLORIDA

CERTIFIER INFORMATION

TYPE OF CERTIFIER: CERTIFYING PHYSICIAN

MEDICAL EXAMINER CASE NUMBER: NOT APPLICABLE DATE CERTIFIED: MAY 15, 2018

TIME OF DEATH (24 HOUR): 1430

CERTIFIER'S NAME: RAKESH MITTAL

CERTIFIER'S LICENSE NUMBER: ME73653

NAME OF ATTENDING PHYSICIAN (IF OTHER THAN CERTIFIER): NOT ENTERED

STATE REGISTRAR

THE ABOVE SIGNATURE CERTIFIES THAT THIS IS A TRUE AND CORRECT COPY OF THE OFFICIAL RECORD ON FILE IN THIS OFFICE. THIS DOCUMENT IS PRINTED OR PHOTOCOPIED ON SECURITY PAPER WITH WATERMARKS OF THE GREAT. SEAL OF THE STATE OF FLORIDA DO NOT ACCEPT WITHOUT VERIFYING THE PRESENCE OF THE WATER-WARNING:

MARKS. THE DOCUMENT FACE CONTAINS A MULTICOLORED BACKGROUND, GOLD EMBOSSED SEAL, AND THERMOCHROMIC FL. THE BACK CONTAINS SPECIAL LINES WITH TEXT, THE DOCUMENT WILL NOT PRODUCE.

OH FORM 1946 (03-13)

TEICATION OF VITAL

Exhibit 3 Article 11 Par. A

THIRD AMENDMENT TO THE REVOCABLE TRUST AGREEMENT OF MARY ANN DUVALL

MADE THIS March 1,2012, by MARY ANN DUVALL, a resident of Pinellas County, Florida, as Grantor and Trustee.

THE AGREEMENT establishing the Trust Agreement of MARY ANN DUVALL, dated November 16, 2007, and amended by the FIRST AMENDMENT, dated November 11, 2008, and further amended by the SECOND AMENDMENT, dated July 8, 2010, and is hereby amended pursuant to Article XV in the following respects:

Instead of as provided, in the event the Grantor is unable or unwilling to serve, then KEVIN LEONARD DUVALL and MICHAEL GLEN WOLF shall serve as first successor, Co-Trustees. In the event of a vacancy by KEVIN LEONARD DUVALL then ERIC JON DUVALL shall serve as first alternate successor Co-Trustee. In the event of a vacancy by MICHAEL GLEN WOLF, then JOSEPH F. PIPPEN, JR. shall serve as second alternate successor Co-Trustee. In the event of a vacancy by ERIC JON DUVALL, then MELANIE CLARA DUVALL shall serve as third alternate successor Co-Trustee. In the event of a vacancy by JOSEPH F. PIPPEN, JR., then CYNTHIA J. McMILLEN shall serve as fourth alternate successor Co-Trustee.

3/1/12 man **ARTICLE II: DISTRIBUTION:** Shall be restated in its entirety as follows:

Upon the death of the Grantor, the Trustee shall distribute the property remaining in the Trust estate as follows:

- A. Any interest in MAINLANDS-LAKES REALTY, INC. shall be distributed to KEVIN LEONARD DUVALL, and if he is not living, then to his issue, if any, per stirpes, and if none, then to ERIC JON DUVALL.
- B. The balance of the trust estate shall be distributed to **KEVIN LEONARD DUVALL** as follows:
 - 1. Thirty Thousand dollars (\$30,000.00) shall be distributed to KEVIN annually.
 - 2. The remaining balance of this share shall be distributed to KEVIN upon reaching the age of sixty-two (62).
 - In the event that KEVIN is not living, or if he dies before receiving his full share, then the remaining balance shall be distributed in the same manner as stated above to his issue, if any, per stirpes, and if none, then to ERIC JON DUVAL, also as above stated.

ARTICLE III

RETENTION OF MINOR BENEFICIARY INTEREST: In the event that any of the beneficiaries under this Trust shall not yet have attained the age of twenty-one (21) years when he or she becomes entitled to distribution of his or her share, then the Trustee shall retain such share for the beneficiary until such beneficiary has attained the age of twenty-one (21) years; provided,

3/1/12 mad

-2-

however, that the Trustee, in his sole discretion, may make distributions from such interest so withheld for a minor beneficiary to provide such minor with proper support, maintenance, care and education, through college if the Trustee deems such appropriate.

IN ALL OTHER RESPECTS, THE TRUST AGREEMENT SHALL REMAIN AS FIRST MADE.

IN WITNESS WHEREOF, MARY ANN DUVALL has signed this Third Amendment to her Trust Agreement as Grantor and Trustee.

Signed, Sealed and Delivered

in the Presence of:

naryhun LuvalliSEAL

MARYANN DUVALL

As Grantor and Trustee

3/1/12 m as

STATE OF FLORIDA COUNTY OF PINELLAS

We, MARY ANN DUVALL, SARAH HAMLIN and PATRICIA R. WATKINS, the Grantor/Trustee and the witnesses respectively, whose names are signed to the attached or foregoing instrument, having been sworn, declared to the undersigned officer duly authorized in the State and County aforesaid to take acknowledgments, personally appeared MARY ANN DUVALL, SARAH HAMLIN and PATRICIA R. WATKINS, to me known to be the persons described in or has produced a driver's license as identification and that the Grantor/Trustee signed the instrument as her Trust Agreement, that she signed, and that each of the witnesses, in the presence of the Grantor/Trustee and in the presence of each other, signed this document as a witness.

MARY ON DUVALI

Witne

Witness

STATE OF FLORIDA COUNTY OF PINELLAS

SWORN TO and subscribed before me by MARY ANN DUVALL, the Grantor/Trustee, and by SARAH HAMLIN and PATRICIA R. WATKINS, the witnesses, this March 1,2012.

NOTARY PUBLIC, STATE OF FLORIDA

SUZANNE E. LOMBARDO
MY COMMISSION # DD 759286
EXPIRES: June 15, 2012
Bonded Thru Notary Public Underwriters

3/1/12 ·m OD

CERTIFICATE

ONE HUNDRED (100)

Lund to KEVIN LEONARD DUVALL

TRUST AGREEMENT OF MARY ANN DUVAL!

Dated 11/16/2007

CONE HUNDRED (100)

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: August 14 2018 (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	will not be listed as the
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 statemer must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt .
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
☐ 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.	
Dated8/14/18	
Signature Z. Dund	
(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)	
Kevin L. Durall	
(Typed or printed name of person signing)	
President Shareholder	
(Title of person signing)	