## K15098

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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2011 NOV -1 PM 4: 43
SECRETARY OF STATE
TALLAHASSEE FI OBID.

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	NATION: Berkowin	tz Realty Group	Inc		
DOCUMENT NUMB	ER: K15098				
The enclosed Articles	of Amendment and fee are subm	itted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	PRINCESS N (Name of C	1. Hidalgo			
	(Name of C	ontact Person)			
Berkowitz Development Group  (Firm/Company)					
	,	•			
	2665 S. Bayshore Drive Suite#1200				
	(Ad	dress)			
	Coconut Grove F1 33133  (City/State and Zip Code)				
	(City/ State	and Zip Code)			
Phidalop Dherkowitzdev. Com E-mail address: (to be used for future annual report notification)					
For further information	concerning this matter, please c	all:			
(Nome o	f Contact Person)	at ( 305 ) 854-2 (Area Code & Daytime	800		
(Name o	(Contact Person)	(Area Code & Daytime	relephone Number)		
Enclosed is a check for	the following amount made pay	able to the Florida Department of	f 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)		
Mailing Address		Street Address Amendment Section	•		
Amendment Section Amendment Section  Division of Corporations Division of Corporations					
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center C	ircle		



## FLORIDA DEPARTMENT OF STATE Division of Corporations

October 19, 2011

Princess M. Hidalgo Berkowitz Development Group 2665 S. Bayshore Drive, Suite 1200 Coconut Grove, FL 33133

SUBJECT: BERKOWITZ REALTY GROUP, INC.

Ref. Number: K15098

We have received your document for BERKOWITZ REALTY GROUP, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The articles of amendment are incomplete. The third page is missing. I have enclosed a blank third page that you may fill out and return to us when you resubmit the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6907.

Annette Ramsey Regulatory Specialist II

Letter Number: 011A00023966

11 NOV -1

Articles of Amendment
to .
Articles of Incorporation 2011 NOV - 1 PM 4: 43
Berkowitz Realty CASEFRETABLEE STATE
(Name of Corporation as currently filed with the Florida Dept. of State)
K15098
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopt the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.
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 MAY BE A POST OFFICE BOX)
· · · · · · · · · · · · · · · · · · ·
•
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent: Der KOWITZ Development Group
Name of New Registered Agent: Berkowitz Development Group 2665 S. Bayshore Dr. Suitz#1200
New Registered Office Address: (Florida street address)
Coconut Grave Florida 33133
Cocorut Grove, Florida 33133 (City) 7 (Zip Code)
(5.13)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am famillar/with and accept the obligations of the
position.
Signature of New Ret Weed 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>vP</u>	Michael R. Berkowitz	2665 S. Boyshore Drivi Suitz#1200 Coconut Grove F1 33133	Add Remove
	<del></del>		Add Remove
<del></del>			Add Remove
	ing or adding additional Articles, enter ditional sheets, if necessary). (Be specij		
<del></del>			

The date of each amendment(	) adoption: 10 3 2011
Effective data if applicable	(date of adoption is required)
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s sufficient for approval.
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):
"The number of votes c	st for the amendment(s) was/were sufficient for approval
by	.,,,
(	poting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated	0 27 200
Signature	
(By a	director, presider of other officer - if directors or officers have not been
selec	ed, by an incorporator — if in the hands of a receiver, trustee, or other court need fiduciary tylthat fiduciary)
	Jeffrag L. Berkowitz
	(Typed or printed name of person signing)
	DPT
	(Title of person signing)