# K80904

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2021 OCT -4 AM 6: 44
SECRETARY OF SHAPE

### **₹** COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: SPACE COAST R	EAL ESTATE, INC.			
DOCUMENT NUM	K 80004				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	Shannan Field, Esq.				
		Name of Contact Person	1		
	The Law Office of Shannan M. Field, PA				
		Firm/ Company			
	1135 S. Washington Ave., Su	iite A			
		Address	······································		
	Titusville, FL 32780				
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code			
	shannanfield@yahoo.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati Shannan Field	on concerning this matter, plea	se call:at (	362-5414		
Name	of Contact Person	at ( Area Co	de & Daytime Telephone Number		
Enclosed is a check t	or the following amount made	payable to the Florida Depa	artment 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)		
Mailing Address		Street Address			
	nendment Section	Amendment Section			
	vision of Corporations  D. Box 6327	Division of Corporations The Centre of Tallahassee			
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## **Articles of Amendment** Articles of Incorporation of

# FILED

2021 OCT -4 AM 6: 44

SPACE COAST REAL ESTATE, INC.		SECRETARY OF STATE
(Name o	of Corporation as currently	v filed with the Florida Dept. of State
K80904		
	(Document Number of	f Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" chartered," "professional association,"	Corp," "Inc," or "Co". A	company," or "incorporated" or the abbreviation "Corp.,"  4 professional corporation name must contain the word  .
B. Enter new principal office address, (Principal office address MUST BE A S		
(Frincipal office address MOST DE AS	TREET ADDRESS )	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		
D. If amending the registered agent ar	ud/ou masistamed office odd	wees in Elevide, enter the name of the
new registered agent and/or the new		
Name of New Registered Agent	Shannan Field, Esq.	
rame of the regimeral right	1135 S. Washington Ave.,	Suite A
	(Florida str	vet address)
New Registered Office Address:	Titusville	. Florida
New Negistried Office Auditors.		(City) (Zip Code)
New Registered Agent's Signature, if c		: with and accept the obligations of the position.
	Signature of New R	egistered Agent, if changing

#### 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)

Example:

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.

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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PD	Louie C. Human	2150 Turpentine Rd.
Add			Mims, FL 32754
Remove 2) Change	PD	Flora Human P/R of Estate	2150 Turpentine Rd.
X Add			Mims, FL 32754
Remove 3) Change	Clerk	Claudine Brandon	162 Island View Drive
X Add			Indian Harbour Beach, FL 32937
Remove			
4) Change		-	
Add			
Remove			
5) Change Add		_	
Remove			
6) Change			<u></u>
Add			
Remove			

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f an ami	endment provide	es for an exchan	ige, reclassifica	tion, or cancella	ition of issued sl	hares.
<u>provisio</u>	ons for implemen	ting the amend	ment if not cor	itained in the ar	nendment itself:	<u></u>
(if n	not applicable, ind	licate N/A)				
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	doption:	, if other than the
date this document was signed.		
date Effective date <u>if applicable</u> :	of filing	
Effective date in applicame.	(no more than 90 days after amendment f	(ile date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requepartment of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors withou	t shareholder action and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east fourfficient for approval.	r the amendment(s)
•	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the an	-
"The number of votes eas	for the amendment(s) was/were sufficient for approval	
by		••
•	(voting group)	
Dated	17.2021	
Signature	lirector, president or other officer - if directors or office	
selecte	lirector, president or other officer – if directors or office ed, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	ers have not been stee, or other court
	Flora Human	
	(Typed or printed name of person signing)	
	Personal Representative of the Estate of Louie C. Hum	nan
	(Title of person signing)	