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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	DRATION: A-TEAM REAL	TY AND ASSOCIATES. II	NC.		
DOCUMENT NUM	IBER:				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	Thomas M. VanNess, Jr., Esc	quire			
		Name of Contact Persor	1		
	VanNess & VanNess, P.A.				
	Firm/ Company				
	1205 N. Meeting Tree Blvd.				
		Address	<del> </del>		
	Crystal River, FL 34429				
		City/ State and Zip Code			
	tmv@vannesspa.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati Thomas M. VanNes	on concerning this matter, pleases, Jr., Esq.	se call:at ( 352	<b>.</b> 795-1444		
Name	e of Contact Person		_)		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

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## Articles of Amendment to Articles of Incorporation

•	Articles (	of Amendment		
	Articles of	to Elncorporation		1
		of		بن بر،
(Slama		AND ASSOCIATES, INC.		
.50510	or Corporation as curr	ently filed with the Florida	Dept. of State)	
	(Document Numb	er of Corporation (if known	)	
ursuant to the provisions of section 607 s Articles of Incorporation:	7.1006, Florida Statutes, t	this <i>Florida Profit Corporat</i>	ion adopts the following a	mendment(s) to
. If amending name, enter the new r	name of the corporation	<u>ı:</u>		
VA				he new
ame must be distinguishable and contai lnc.," or Co.," or the designation " chartered," "professional association,	"Corp," "Inc." or "Co"	. A professional corporat A."	ion name must contain t	Corp., the word
Enter new principal office address		N/A	_ <del>_</del> .	
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	,			
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Enter new mailing address, if app	olicable:	N/A		
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Enter new mailing address, if app (Mailing address MAY BE A POST	olicable: ** OFFICE BOX*)		a name of the	
Enter new mailing address, if app	olicable: T <u>OFFICE BOX</u> ) ind/or registered office a	address in Florida, enter th	ne <u>name</u> of the	
Enter new mailing address, if app (Mailing address MAY BE A POST)  If amending the registered agent a	olicable: TOFFICE BOX)  und/or registered office a ew registered office add	address in Florida, enter th	ne name of the	
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☐ 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	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	PtD	Robert Thomas Riley	9240 West Turnberry Loop
Add			Crystal River, FL 34429
Remove			
2) Change	STD	Sheryl A. Riley	9240 West Turnberry Loop
X Add			Crystal River, FL 34429
Remove 3 ) Range	<del> </del>		
Add			
Remove			<del></del>
4) Change			<del></del>
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f an amendment provi	des for an exchang	e reclassificatio	n or cancellation	of issued chares	
provisions for implem	enting the amenda	ent if not conta	ined in the amend	ment itself:	
(if not applicable, i	indicate N/A)				
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The date of each amendment(s	) adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehold	er action and shareholder
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amend e sufficient for approval.	lment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment(s	
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
sele	a director, president or other officer - Edirectors or officers have not cted, by an incorporator - if in the hands of a receiver, trustee, or other officer by that fiduciary)	
	Robert Thomas Riley	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	