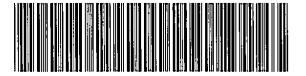
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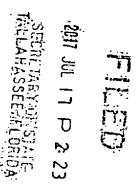
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| PICK-UP WAIT MAIL |
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| Special Instructions to Filing Officer: |
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Office Use Only



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COVER LETTER

Division of Corporations Stiles - Sowers & Associates Realtors anc. 74718 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Julie S. Kukk
Name of Contact Person Stiles - Sowers d'Associales Pealtors Inc.
Firm/Company

241 Airport Rd. S. (Old address)

Address Naples, F2 34104 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Julie Kukk at (239) 290-7604

Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & Certificate of Status ☐ \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Ff. 32301

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation

FILED

of

| Stiles - Sowers & Associate | the filed with the Florida Dept. of State TARY OF STATE |
|--|--|
| | tly filed with the Florida Dept. of State) 18 TALLAHASSEELEL ORIDA of Corporation (if known) |
| Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation: | · |
| A. If amending name, enter the new name of the corporation: | |
| name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "inc." or word "chartered," "professional association," or the abbreviation | "Co". 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>) | 1300 Third St. S. 203E Naples, FL 34102 |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 1300 Third St. S. 203E Naples, F. 34102 |
| D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address | |
| Name of New Registered Agent | - |
| (Florida st | reet address) |
| New Registered Office Address: | (City) , Florida (Zip Code) |
| New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar | |
| Signature of New 1 | Registered 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.

| Example: X Change | PT | John Do | <u>uc</u> | | | |
|-------------------------------|--------------|--------------|-------------|---|-----------------|--|
| X Remove | <u>V</u> | Mike Jo | ne <u>s</u> | | | |
| <u>X</u> Add | <u>8V</u> | Sally Smith | | | | |
| Type of Action (Check One) | <u>Title</u> | | Name | | <u>Addres</u> s | |
| 1) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 2) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 3) Change | | | | | | |
| Add | | _ | | - | | |
| Remove | | | | | | |
| | | | | | | |
| 4) Change | | - | | • | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| | | | | | | |
| 6) Change | | - | | - | | |
| Add | | | | | | |
| Romove | | | | | | |

| If amending or adding add Attach additional sheets, if | necessary). (Be specific | :) | | |
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| f an amendment provides provisions for implement | for an exchange, reclassing the amendment if no | ification, or cancellation to the same | on of issued shares, | |
| (if not applicable, indi | icate N/A) | t contained in the anne | idine it fisett. | |
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| The date of each amendment(s) adoption:date this document was signed. | , if other than th |
|--|--|
| Effective date if applicable: | |
| (no more than 90 days after amendment file date |) |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records. | ts, this date will not be listed as th |
| Adoption of Amendment(s) (CHECK ONE) | |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval. | endment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment | |
| "The number of votes cast for the amendment(s) was/were sufficient for approval | |
| by | |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and s action was not required. | harcholder |
| The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required. | holder |
| Dated7/12/17 | |
| Dated | |
| (By a diructor, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or eappointed fiduciary by that fiduciary) | |
| Julie S. Kukk (Typed or printed name of person signing) | |
| (Typed or printed name of person signing) | |
| President lowner | |
| (Title of person signing) | _ |