195831

| (Re | equestor's Name) | |
|-------------------------|--------------------|-------------|
| (Ac | ddress) | |
| (Ac | ddress) | |
| (Ci | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | usiness Entity Nar | me) |
| (Do | ocument Number) | |
| Certified Copies | Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | ATION: The Janoura Group | o, Inc. | |
|---------------------------|---|--|--|
| DOCUMENT NUMB | M05831 | | |
| The enclosed Articles o | f Amendment and fee are su | bmitted for filing. | |
| Please return all corresp | ondence concerning this ma | tter to the following: | |
| A | Michael Janoura | | |
| _ | <u> </u> | Name of Contact Person | n |
| ٦ | The Janoura Group, Inc. | | |
| _ | | Firm/ Company | |
| 2 | 924 Davie Road, Suite 202 | | |
| | | Address | |
| I | Davie, FL 33314 | | |
| _ | | City/ State and Zip Cod | e |
| manag | cment@janourarealty.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further information | concerning this matter, pleas | se call: | |
| Michael Janoura | | 954 at (| 721-9190 |
| Name of | Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: |
| \$35 Filing Fee | □S43.75 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) |
| Amer Divis P.O. | ng Address adment Section ion of Corporations Box 6327 hassee, FL 32314 | Amend Division Clifton | Address Iment Section on of Corporations Building Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| The Janoura Group, Inc. | | | | |
|--|------------------------------------|-------------------------|-----------------|----------------------|
| (<u>Name of Corpo</u> | oration as currently filed | with the Florida Dept | t. of State) | |
| M95831 | | | | |
| (De | ocument Number of Corpo | oration (if known) | | |
| Pursuant to the provisions of section 607.1006, Flits Articles of Incorporation: | orida Statutes, this <i>Florid</i> | a Profit Corporation ad | dopts the follo | wing amendment(s) to |
| A. If amending name, enter the new name of the | he corporation: | | | |
| | | | | The new |
| name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or | Corp," "Inc," or "Co". | | | |
| B. Enter new principal office address, if applic | cable: | | | |
| (Principal office address MUST BE A STREET. | | | | |
| | | | | |
| | | · | | |
| C. Estanon mallon address (Carallada) | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE | E BOX) | | | |
| | <u>-</u> | | | |
| | | | | |
| | | | | |
| | | | | |
| D. If amending the registered agent and/or reg new registered agent and/or the new register | | Florida, enter the nan | ne of the | |
| | | | | |
| Name of New Registered Agent | | | | |
| | | | | |
| | (Florida street add | ress) | | |
| New Registered Office Address: | | | , Florida | |
| | (City) | | (2 | Zip Code) |
| | | | | |
| | | | | |
| New Registered Agent's Signature, if changing | | | | |
| I hereby accept the appointment as registered age | ent. I am familiar with an | d accept the obligation | - 12° | |
| | | | 1-53 | 201 |
| | | | <u>-</u> | F II |
| | Signature of New Register | red Agent if changing | 10.0 | I waste |
| | Signature of New Register | eu Agem, ij changing | | 6.46.43 |
| | | | | |
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| | | | | , |

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 | <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> | <u>Name</u> | Address |
| 1)Change | D | Joseph Janoura | 2924 Davie Road |
| Add | | ı | Suite 202 |
| X Remove | | · | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Add Remove | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

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| f an amendment provides for an excl | hange, reclassification, or cancellation of issued shares, |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| an amendment provides for an exclorovisions for implementing the ame (if not applicable, indicate N/A) | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| provisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
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