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AUG 0 9 2018 T. LEWELY.

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	a is Real, Unc.		
DOCUMENT NUMBER: N13000	0005448		
The enclosed Articles of Amendment and fee	e are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
	Amanda Hart.		
	(Name of Contact Person)		
	VP		
	(Firm/ Company)		
F).O. BOY 1858		
	(Address)		
Port Bichey, FL. 34668			
·	(City/ State and Zip Code)		
amanda @	blackjacking. com o be used for titure annual report notification)		
E-mail address: (t	• 0		
For further information concerning this matter	r, please call:		
Amanda Hart 1727-959-4540			
(Name of Conta	ct Person) (Area Code) (Daytime Telephone Number)		
Enclosed is a check for the following amount	made payable to the Florida Department of State:		
☐ \$35 Filing Fee ☐ \$43.75 Filin Certificate o	g Fee & S43.75 Filing Fee & S52.50 Filing Fee f Status Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is Enclosed)		
Mailing Address Amendment Section	Street Address Amendment Section		

Amendment Section Division of Corporations P.O. Box 6327 Tailahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment

10 Articles of Incorporation
Santa I S Kecl, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
113000005448
(Document Number of Corporation (if known)
Pursuant to the provisions of section 617.1006. Florida Statutes, this <i>Florida Not For Profit Corporation</i> adopts 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: 1009 Lakewill Tonve
(Principal office address MUST BE A STREET ADDRESS) New Port Buckey, Fl.
34654
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) P.D. 1858
(Mailing address MAY BE A POST OFFICE BOX) Port Prichey, Fl. 341e168
+011 1-94-1-12 17 2. STEED
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: Amanda Hart
11009 Lakenew brive
New Registered Office Address: (Florida street address)
New Port Buchey Florida 34484
New Post Kuchey Florida 34481 (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Inardael Hotig = m
Signature of New Registered Agent, if changing
man

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 X Remove X Add	V Mike	Doe e Jones e Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	<u>T</u>	Carol Pams	5441 Manatee Pt. Dr New Port Richay Pl. 34452
2) Change Add	T	Chenyl West	11003 Lateriew Dr. New Port Richey Pl. 34654
Remove 3) Change Add Remove	3_	Sheny Joiner	8015 Tanglewood Brive New Post Ruchey, Fl. 34454
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)					
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The date of each amendate this document was sign		if other than the
Effective date <u>if applical</u>	bie:	
	(no more than 90 days after amendment file date)	
	I in this block does not meet the applicable statutory filing requirements, this date will on the Department of State's records.	not be listed as the
Adoption of Amendmen	t(s) (<u>CHECK_ONE</u>)	
The amendment(s) was/were sufficient f	vas/were adopted by the members and the number of votes cast for the amendment(s) for approval.	
There are no membe adopted by the board	ers or members entitled to vote on the amendment(s). The amendment(s) was/were d of directors.	
Dated _	7/30/18	
Signature _	Malline	
(B h:	By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
	GANY JOMPA	
	(Typed or printed name of person signing)	
	Prosident	
	(Title of person signing)	