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PICK-UP	☐ WAIT	MAIL
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COVER LETTER
TO: Amendment Section Division of Corporations
NAME OF CORPORATION: 1499 Realty Corp. DOCUMENT NUMBER: P00000 48032
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person (1499 Realty Corp. Firm/ Company 20 Callison Lane Address Varkes NJ 08043 City/ State and Zip Code Debby B Schwartza g Mail - Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (856) 264-1431 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)

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

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

Street Address

Article	es of Amendment
, Autholog	to of Incorporation
1499 Realty	Corp.
(Name of Corporation as currently filed with	1 the Florida Dept. of State)
P000000 48	032
(Document Number of Corpora	ation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporati	on:
	The new
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevious	oration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the ation "P.A."
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>)	1499 West Kalmetto Park Rd. Boca Raton, FL 33486
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Debora Schwartz 20 Callison Lane Voorhees, NJ 08043
D. If amending the registered agent and/or registered office	
new registered agent and/or the new registered office ac	ldress:
Name of New Registered Agent	
(Flor	ida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam	Agent: with and accept the obligations of the position
, are appointment to regulered agent. I uni juni	mai min and accept the congunous of the position.
Signature of New Regist	ered 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	Doe	
X Remove	V Mike	: Jones	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>DP</u>	Richard C. Bailin	46 Johnson Avenue
Add Remove			Englewood Cliffs NJ 07632
2) Change	VDT	Barry Bailin	46 Johnson Avenue
Add Remove 3) Change			Englewood Cliffs NJ 07632
Add Remove			
4) Change			
Remove			
5) Change			
Remove		·	
6) Change			
Add			
Remove			

	onal sneets, ij neces	isary). (Be specifi	If amending or adding additional Articles, enter change(s) here: Attach additional sheets, if necessary). (Be specific)			
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	nent provides for s	an exchange, reclas	sification, or cance of contained in the	ellation of issued shar amendment itself:	28 .	
an amendn rovisions fo (if not ap	pplicable, indicate l	N/A)				
an amendn rovisions fo (if not ap	oplicable, indicate	N/A) 				
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an amendn rovisions fo (if not ap	oplicable, indicate	N/A)				

date this document was signed.	loption:	, if other than th
Effective date if applicable:		
<u> Бурунация</u> .	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voining group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated/	Jeling Johnson	
	rector, president or other officer if directors or officers have not been	
≥ G selected	, by an incomporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Debora Schwartz	_
	(Typed or printed name of person signing)	
	President	
•	(Title of namon signing)	