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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORRORATI	Heritage f	Real Estate A	ssociates, Inc.
DOCUMENT NUMBER:	P000000559	962	
The enclosed Articles of An			
Please return all correspond	ence concerning this mat	ter to the following:	
<u>Jo</u>	hn H. Gallan		
11.		Name of Contact Person	
He	ritage Reai i	Estate Associ	ates, Inc.
40	0 El '	Firm/ Company	
<u>16</u>	3 Flamingo I	Drive	——————————————————————————————————————
5		Address	
Be	lleair, FL 33		
		City/ State and Zip Code	2
iha@	handgstructu	ires.com	
		ed for future annual report	notification)
For further information con	cerning this matter, pleas	e call:	
John H. Galla	nt	_{at (} 727	688-2524
Name of Co	ntact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made p	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	\$43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section of Corporations Building xecutive Center Circle
		Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

Articles of fact	i poi attou
Heritage Real Estate Associates, In	C.
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
P00000055962	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Blue 9 Realty, Inc.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	o". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	Blue 9 Realty, Inc.
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	163 Flamingo Drive
	Belleair, FL 33756
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Blue 9 Realty, Inc.
· · · · · · · · · · · · · · · · · · ·	91495 Overseas Hwy
	Tavernier, FL 33070
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address: (City)	, Florida(Zip Code)
Спу	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	SECRETARY TO THE SECRET
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	tent if changing
Signature of New Registered Ag	rent, if changing PLORIDA 2: 05

Page 1 of 4

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		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		_		
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
· · · · · · · · · · · · · · · · · · ·	
	
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f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable: 6/6/14	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 6/5/14 Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
John H. Gallant, Jr.	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	