## PD1000108540

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
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(Business Entity Name)			
(Dasiness Linky Harris)			
(Document Number)			
Certified Copies Certificates of Status			
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SECRETARY OF STATE
FALLAHASSEE FLOOR

Marken

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: BROOK	e Realty + Develop	omant Corp.
DOCUMENT NUMBER: P0/000	108540 Fei	#65-1158318
The enclosed Articles of Amendment and fee ar	e submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
DA VI	ame of Contact Person	<del></del>
	Firm/Company	
1801 Charme	Address Address	
BOED Rotory PL	ty/ State and Zip Code	
SUTTON BOCA O	AOL-COM Tor future annual report notification)	
For further information concerning this matter,	please call:at (	lephone Number
Enclosed is a check for the following amount m	ade payable to the Florida Depar	tment of State:
\$35 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	Street Address Amendment Section	
Amendment Section Division of Corporations	Division of Corporations	
PO Box 6327	Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

## **Articles of Amendment**

to

Articles of Inco	orporation
of	APO 10
BROOKE Realty + Developer	new Coep.
Name of Corporation as currently filed with	
P0100010854	C RED
(Document Number of Corporat	ion (if known)
Pursuant to the provisions of section 607.1006, Florida Statut amendment(s) to its Articles of Incorporation:	tes, this Florida Profit Corporation ad the following
A. If amending name, enter the new name of the corporatio	
BROOKE + BREHT Realty De	velopment - CORP. ine new
name must be distinguishable and contain the word corpabbreviation "Corp.," "Inc.," or Co.," or the designation "Coname must contain the word "chartered," "professional association of the contain the contain the word "contain the word "corp."	coration," "company," or "incorporated" or the Corp," "Inc," or "Co". A professional corporation ation," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:	1801 Clintmoore Rd \$204
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	BORA Rating FL 33487
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1801 Chirmone Rd 204 BORA Rober Ph 33487
	BORA Robert BL 33487
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 ad	dress:
Name of New Registered Agent:	
Nume of New Negastereu rigem.	
New Registered Office Address: (Flor	ida street address)
New Registered Office Made ess.	
(City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered A I hereby accept the appointment as registered agent. I am fam.	sgent:  iliar with and accept the obligations of the position.
Thereby decept the appointment as registered agent. I am jum	maryman data decept the congunities of the position.
Signature of New	Registered Agent, if changing
Signilla 9, Son	Togare our ngorn, sy oranig ng
/ Page 1 c	of 3

If amending	the Officers and/or Directors, enter	the title and name of each off	icer/director being
	d title, name, and address of each Of	ficer and/or Director being ac	lded:
(Awach addi	tional sheets, if necessary)		
Title .	Name	Address	Type of Action
			Remove
		×	<del></del>
			L Romovo
			- Add
			☐ Remove
	(	<del> ,</del>	<u></u>
D 10 .	P	4 <b>k</b> (-) <b>k</b>	
	ling or adding additional Articles, endditional sheets, if necessary). (Be sp		
	amoran sireets, if recessory,. (De up		
<del></del>			
	(		
F. If an am	nendment provides for an exchange,	reclassification, or cancellation	n of issued shares,
	ns for implementing the amendment of applicable, indicate N/A)	if not contained in the amend	imentaseir:
		<u> </u>	

The date of each amendment(s) adop	ortion: 9/14/A
The date of each amendment(s) adop	(date of adoption is required)
Effective date if applicable:	ore than 90 days after amendment file date)
(no mo	ore than 90 days after amendment file date)
•	
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopt by the shareholders was/were suffice.	ed by the shareholders. The number of votes cast for the amendment(s) cient for approval.
	eved by the shareholders through voting groups. The following statement ch 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	group)
(voting	group)
action was not required.	ed by the board of directors without shareholder action and shareholder ed by the incorporators without shareholder action and shareholder
Dated 9//	4/09 MM
selected, by	tor, president of other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)
	(Typed or printed name of person signing)
<del></del>	(Title of person signing)