Note: Please print this page and use it as a cover sheet. Type the lax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

(((H20000074303 3)))



H200000743033ABCT

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

T			
To:	Division of Corporations		
	Fax Number : (850)617-6380		
from:			
rrom:	Account Name : SHERYL SECKEL HUNTER PA		
	Account Number : 120200000028		
	Phone : (813)867-2640		
	Fax Number : (813)867-2641		
	**Enter the email address for this business entity annual report mailings. Enter only one email		2020 MAR 74,517 114
	Email Address:	· · · · · · · · · · · · · · · · · · ·	55 55
			-
			•
	COR AMND/RESTATE/CORRECT OR	OD RESIGN	
	REALADVICE, P.A.		
	Certificate of Status	0	PH 12: 4
	Certified Copy	0	17
	Page Count	05	
		<u> </u>	2
	Estimated Charge	\$35.00	. 92
	-		. C
			2020 HAR
			1 '
			<u>ن</u> رن
			₽
	Electronic Filing Menu — Corporate Filing Menu —	Help	

(((1120000074303 3)))

COVER LETTER

Division of Corporations						
NAME OF CORPORATION: REALADVICE, P.A.						
DOCUMENT NUM	P/12/1/1/12/62/5					
The enclosed Article.	s of Amendment and fee are su	bmitted for filling.				
Please return all correspondence concerning this matter to the following:						
	Katelyn Dougherty					
		Name of Contact Person				
	Hunter Business Law					
****		Firm/ Company				
	119 S. Dakota Avenuc					
•	Address					
	Tampa, FL 33606					
	City/ State and Zip Code					
-	annualreports@hunterbusine	sslaw.com				
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Katelyn Dougherty		at (867-2640			
Name	of Contact Person	Area Coo	le & Daytime Telephone Number			
Enclosed is a check f	or the following amount made	payable to the Florida Depa	irtment of State;			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fec & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
An Die P.C	niling Address endment Section vision of Corporations D. Box 6327 ilahassee, Fl. 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ssee, F1, 32303			

 $(((H20000074303\ 3)))$

Articles of Amendment to Articles of Incorporation of

EALADVICE, P.A.			
•	filed with the Florida Dept. of State)	
02000013635			
(Document Number of	Corporation (if known)	•	
arsuant to the provisions of section 607.1006, Florida Statutes, this F Articles of Incorporation:	Florida Profit Corporation adopts the f	ollowing amendment(s	ร) เบ
If amending name, enter the new name of the corporation:			
EALADVICE, INC.		The new	
time must be distinguishable and contain the word "corporation," "co inc.," or Co.," or the designation "Corp." "Inc," or "Co". A chartered," "professional association," or the abbreviation "P.A."	ampany," or "incorporated" or the abb professional corporation name must	reviation "Corp" contain the word	
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS			
Enter new mailing address, if applicable: (Malling address MAY BE A POST OFFICE BOX)		2020 HA 5EU TALI	•
		:	
		<u>, , , , , , , , , , , , , , , , , , , </u>	Ī
and the state of t	t. Chadda askershanama af tha	÷ -	1
. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:		PH I2: 47	T
Name of New Registered Agent			
(Florida stre	ant addesses		
ir tortaa sire	er (All Entry		
	. Florida		
New Registered Office Address:	(Citv)	(Zip Code)	

(((H20000074303 3)))

tach additional sheets, if necessary).	(Be specific)	
		
•		
		,
		<u> </u>
-·		
		••
an amendment provides for an exclusions for implementing the ame	nange, reclassification, or cancellation of issued shares, udment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		•

(((H20000074303 3)))

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	<u>V</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	D	TODD D. JONES	3839 WEST KENNEDY BLVD.
Add		_	TAMPA, FL 33609
Remove			
2) X Change	D	JORYN JENKINS	3839 WEST KENNEDY BLVD.
Add +		·	TAMPA, FL 33609
Remove 3) Change			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

(((H20000074303 3)))

The date of each amendment(s) adoption:	, if other than th
Effective date if applicable:	
(no more than 90 days after ame	ndmenı file date)
Note: If the date inserted in this block does not meet the applicable statutory fidocument's effective date on the Department of State's records.	ling requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the incorporators, or board of director action was not required.	s without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of vote by the shareholders was/were sufficient for approval.	s cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting ground must be separately provided for each voting group entitled to vote separately	
"The number of votes cast for the amendment(s) was/were sufficient for	njoproval
by	" "
(voling group)	
March 4, 2020	
17aico_	
Signature (By a director, president or other officer – if directors selected, by an incorporator – if in the hands of a recomposite appointed fiduciary by that fiduciary)	
Todd D. Jones	
(Typed or printed name of person	signing)
Director	•
(Title of person signing)	