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COVER LETTER				
TO: Amendment Section Division of Corporations ALL FLAGLE	SR REDITY INC			
NAME OF CORPORATION:				
DOCUMENT NUMBER: PO2000 23	408			
The enclosed Articles of Amendment and fee are submit	ted for filing.			
Please return all correspondence concerning this matter t	o the following:			
THOMAS SC.	HROEDER			
Name of Contact Person				
ALL FLAGLER REALTY INC				
Firm/ Co	тралу			
23 LUDLOW LA	hue U			
Add	ress			
PALM COAST City/State as	FL. 32137			
TSCHROEDER 8 C				
E-mail address: (to be used for future	annual report notification)			
For further information concerning this matter, please call:				
THOMAS SCHROEDER 211	386, 445-7875			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made paya	ble to the Florida Department of State:			
Certificate of Status Co	3.75 Filing Fee & S52.50 Filing Fee ertified Copy Certificate of Status dditional copy is enclosed) Certified Copy (Additional Copy is enclosed)			
Amendment Section Ame Division of Corporations Divi P.O. Box 6327 Clift Tallahassee, FL 32314 266	et Address endment Section sion of Corporations on Building Executive Center Circle ahassee, FL 32301			

Articles of Amendment to Articles of Incorporation

AU FLAGIER RESery In	.
(Name of Corporation as currently filed with the Florida Dept. of	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Projamendment(s) to its Articles of Incorporation:	THE Corporation adopts the following
A. If amending name, enter the new name of the cornoration:	The new
name must be distinguishable and contain the word "corporation," "company abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Corname must contain the word "chartered," "professional association," or the abbrev	" or "incorporated" or the A professional corporation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	à **
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	TI JUN 27 AM 9:
D. If amending the registered agent and/or registered office address in Florida, new registered agent and/or the new registered office address:	enter the name of the
Name of New Regionsed Agent THOMAS SCHROED	
New Registered Office Address: -23 Lublow LA (Florida street address) PALM (DDST	
PALM COAST (City)	Zip Code)
New Registered Agent's Signuture, if changing Registered Agent: I hereby accept the appointment as registered agent. I fam fimilies with and accept to Signoward of New Registered Agent, if a	
January of Non August ou Agon, y	······································

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)

Title	Name	<u>Address</u>	Type of Action
18	ALDERT M ESPOSITO	206 Mosoy RD FLORIDO 32/36	☐ Remove
			Add Remove
	···		Add Remove
E. If ame	ending or adding additional Articles, enter additional sheets, if necessary). (Be speci	change(s) here:	
provi	amendment grovides for an exchange, rec sions for implementing the amendment if not applicable, indicate N/A)	lassification, or cancellation of iss not contained in the amendment	ued shares. tself:

The date of each amendment(s) adoption: 6/21/11
Effective date if unplicable:	(date of adoption is required)
	(no more than 90 days after amendmens film date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
The amendment(s) was/were must be separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	oting group)
(A)	oting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
Signature (By a select	director, president or other officer - if directors or officers have not been sed, by an incorporator - if in the hands of a receiver, trustee, or other count need fiduciary by that fiduciary)
	AUBERT M Espos to (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	VP
	(Title of person signing)