P0200004724

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cir	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

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MAY 1 1 2016 A RAMSEY

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Devon Sory, Inc.					
DOCUMENT NUMBER: P020000047266		······································			
The enclosed Articles of Amendment and fee are su	bmitted for filing.				
Please return all correspondence concerning this ma	tter to the following:				
Devon Sory					
	Name of Contact Person	1			
Devon Sory, Inc.					
	Firm/ Company				
917 North Flagler Drive, Suit	917 North Flagler Drive, Suite 208				
	Address				
West Palm Beach, Florida 33	3401				
	City/ State and Zip Cod	e			
palmbeachrealtor@hotmail.com					
- -	sed for future annual report	notification)			
is man address. (to be de	ou for facility annual report	·			
For further information concerning this matter, please	se call:				
Devon Sory	at (818-8822			
Name of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made	payable to the Florida Depa	artment 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 Amendment Section Division of Corporations P.O. Box 6327	Amend Divisio	Address ment Section on of Corporations Building			

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation of

			a 2 Long type to g
(Name of C	orporation as currentl	y filed with the Florida D	ept.lof \$1400 0 PM 5: 00
P02000047266			
	(Document Number of	f Corporation (if known)	JALLAHASSEE, FLORIDA
Pursuant to the provisions of section 607.1000 ts Articles of Incorporation;	6, Florida Statutes, this	Florida Profit Corporatio	
. If amending name, enter the new name	of the corporation:		
			The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,	n "Corp," "Inc," or "	Co". A professional corp	orporated" or the abbreviation
3. Enter new principal office address, if ap	onlicable:	917 North Flagler Driv	e
Principal office address <u>MUST BE A STRE</u>		Suite 208	
		West Palm Beach, FL	33401
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		917 North Flagler Drive	
		Suite 208	
		West Palm Beach, FL 33401	
D. If amending the registered agent and/or			name of the
new registered agent and/or the new re-		<u>i.</u>	
De	von Sory	<u>:</u>	
Name of New Registered Agent De			
Name of New Registered Agent De	von Sory 7 North Flagler Drive, S		
Name of New Registered Agent 91	von Sory 7 North Flagler Drive, S (Florida str	Suite 208	h Florida 33401

address of each Officer (Attach additional sheets Please note the officer/de P = President; V= Vice Executive Officer; CFO held. President, Treasure Changes should be noted	and/or I i, if neces, irector lit Presiden = Chief er, Direct I in the factors and the coves the coves	Director being added: sary) le by the first letter of the office t; T= Treasurer; S= Secretary; Financial Officer. If an officer or would be PTD. bllowing manner. Currently Joh corporation, Sally Smith is name	title: D= Director; TR= Tr /director holds more tl m Doe is listed as the F	director being removed and title, name, and rustee; C = Chairman of Clerk; CEO = Chief han one title, list the first letter of each office PST and Mike Joyes is listed as the V. There is hould be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
_X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>		Address
1) Change				
Add				· · · · · · · · · · · · · · · · · · ·
Remove		HA		
2)Change		_ `		
Add				
Remove				
3) Change				
Add			NA	
Remove			1171	
4) Change	<u></u>	/	· · · · · · · · · · · · · · · · · · ·	
Add		,		
Remove				
5) Change			· · · · · · · · · · · · · · · · · · ·	
Add				
Remove				
6)Change				
Add				W1=10-0
Remove				

(A)	amending or adding additional Articles, enter change(s) here. ttach additional sheets, if necessary). (Be specific)
Thes	e forms are being submitted for change of address(es) only.
ALL	addresses are to reflect 917 North Flagler Drive, Suite 208, WPB, FL 33401
Than	k you, Devon Sory PTS
•	Dermon
_	
•	
7. <u>II</u>	an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
*	(if not applicable, indicate N/A)

The date of each amendment		, if other than the
date this document was signed		
Effective date if applicable:	May 5, 2016	
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
- The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes cast for the amendmentere sufficient for approval.	t(s)
	re approved by the shareholders through voting groups. The following states ed for each voting group entitled to vote separately on the amendment(s):	nen!
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	re adopted by the board of directors without shareholder action and shareholder	der
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
May Dated	5, 2016	
Signature _	Dernor	
(Ē	By a director, president or other officer - if directors or officers have not bee	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other co	urt
a	ppointed fiduciary by that fiduciary)	
	Devon Sory	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	PTS	
	(Title of person signing)	