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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: HOUSETF	RADERS REA	ALTY,	INC.
DOCUMENT NUMBER: P020001019	99		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.		
Please return all correspondence concerning this m	atter to the following:	:	
Tibor P Kollar			
	Name of Contact	Person	,,
Broadway Realty	y & Managen	nent, I	nc.
	Firm/ Compa	any	
12811 Kenwood	Lane 103		
	Address		
Fort Myers, FL 3	3907		
	City/ State and Z	ip Code	
peter@BAMFLA.cor	m		
E-mail address: (to be u		report not	ification)
For further information concerning this matter, plea	ase call:		
Tibor P Kollar	at (239	9 ,	777 0022
Name of Contact Person			& Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florid	la Departn	nent of State:
■ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing F Certified Copy (Additional copy 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	1	Clifton Bu 2661 Exec	nt Section f Corporations

Articles of Amendment Articles of Incorporation of

HOUSETRADERS REALTY, INC.	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P02000101999	

P02000101999		
(Document Number of Corporation ((if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following	amendment(
A. If amending name, enter the new name of the corporation:		
Broadway Realty & Management, Inc.	;	The new
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must co	previation ontain the
B. Enter new principal office address, if applicable:	12811 Kenwood Lane 103	
(Principal office address MUST BE A STREET ADDRESS)	Fort Myers, FL 33907	
		ಪ
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	12811 Kenwood Lane 103	BCT :
	Fort Myers, FL 33907	28 E
	1	≅ □
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres	dress in Florida, enter the name of the	12: 52
Name of New Registered Agent	***************************************	
(Florida st	treet address)	
New Registered Office Address: 12811 Kenwood	d Lane 103 _{, Florida} 33907	
(City		
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.	
Signature of New Registered	Agent, if changing	

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 <math>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	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	Tibor P Kollar	12811 Kenwood Lane 103
Add			Fort Myers, FL 33907
Remove			
2) Change			
Add			
Remove			
3) Change	***		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
	·
·	-
	<u></u>
	,
.,,,	
If an amendment provides for an excha	ange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	dment if not contained in the amendment itself:
(i) not applicable, marcine (571)	
,	

The date of each amendment(s) adoption: October 22, 2013 date this document was signed.	_, if other than the
· ·	
Effective date if applicable: (no more than 90 days after amendment file date)	_
(no more man 70 thays tigher timenament fue time)	
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 10/22/2013	
Calcu	
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)	_
Tibor P Kollar	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_