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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: REP MANAGEM	ENT GROUP, INC.				
DOCUMENT NUME	BER:					
	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	RUSSELL D. KAPLAN, ES	Q.				
		Name of Contact Persor	1			
	RUSSELL D. KAPLAN, P.A.					
		Firm/ Company				
	7951 SW 6TH STREET, STE 210					
	Address					
	PLANTATION, FL 33324					
		City/ State and Zip Cod	2			
Russl	c@rdkpa.com					
	-	sed for future annual report	notification)			
For further informatio Russell Kaplan	n concerning this matter, pleas	se call:954	. 763-7777			
Name	of Contact Person		de & Daytime Telephone Number			
	r the following amount made					
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Amo Div P.O	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301			

Articles of Amendment to Articles of Incorporation of



2022 DEC 20 AM 7: 09

REP MANAGEMENT GROUP, INC.

(Name of Corporation as currently	y filed with the Florida Dept. of State) (1) ATE TALL THE PROOF OF TALL
P03000006090	TALLALANCORE, FL
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this aits Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "(word "chartered," "professional association," or the abbreviation "	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office addr	ess in Flarida, enter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida str	eet address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar v	vith and accept the obligations of the position.
	, , , , , , ,
Signature of New R	egistered 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 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	<u>PT</u>	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>	<u>Addres</u> s
1) X Change	РТ	RICHARD E. PALACIOS	348 E. GARDEN COVE CIRCLE
Add			DAVIE, FL 33325
Remove			
2) Change	TS	RAUL E. PALACIOS	16041 EMERALD COVE RD
Add	-		WESTON, FL 33331
X Remove	VP S	CHRISTINE A. PALACIOS	348 E. GARDEN COVE CIRCLE
3) X Change			DAVIE, FL 33325
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Pamove			

E. <u>If amending</u> (Attach <i>addit</i>	or adding adding additional sheets, if	ditional Articl necessary).	es, enter chang (Be specific)	e(s) here:			
N/A	,	• *	, ,				
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It an amend provisions	<u>iment provide:</u> for implement	s for an exchai	nge, reclassifica	ition, or cancell itained in the ar	ation of issued nendment itse	<u>:lf:</u>	
(if not	applicable, ind	licate N/A)					
N/A 							
		_ _ -					
<u>-</u> .					•		
							
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The date of each amendment(s)	idoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendmen ufficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state reach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
1	(voting group)	
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareho	lder
action was not required	lopted by the incorporators without shareholder action and shareholder	
Signature		
(By a select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other conted fiduciary by that fiduciary)	
	RICHARD E. PALACIOS	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	