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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Prime Realty Ser	rvice, Inc.					
DOCUMENT NUMBER: P03000115116						
The enclosed Articles of Amendment and fee are	submitted for filing.					
Please return all correspondence concerning this r	natter to the following:					
Robyn Gomes						
	Name of Contact Person					
Prime Realty Service	Prime Realty Service					
	Firm/ Company					
1287 University Drive	r and Company					
	Address					
Coral Springs, FL 33071						
-	City/ State and Zip Cod	e				
robyngomesprimerealty@gmail.c	'om					
	used for future annual report	natification				
is man address. (No ice	used for future annual report	nonneations				
For further information concerning this matter, plo	ease call:					
Robyn Gomes	at (<u>7</u> 54	368-4551				
Name of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check for the following amount mad	e payable to the Florida Depa	artinent of State:				
S35 Filing Fee		☐\$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	Amend Divisio Clifton	Address ment Section of Corporations Building xecutive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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of Prime Realty Service, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P03000115116 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Robyn Gomes Name of New Registered Agent 1287 University Drive
(Florida street address) Coral Springs Florida 33071 New Registered Office Address:

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.

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)	Title	<u>Name</u>	Address
1) Change	DP	Sean Kavanaugh	1287 University Drive
Add			Coral Springs, FL 33071
X Remove			
2) Change	V	Nicole Kavanaugh	1287 University Drive
Add			Coral Springs, FL 33071
X Remove			
3) Change	DP	Robyn Gomes	1287 University Drive
X Add			Coral Springs, FL 33071
Remove			
4) Change	<u>v</u>	Peter Luon	1287 University Drive
Add			Coral Springs, FL 33071
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			,

	ending or adding additional Articles, enter change(s) here: h'additional sheets, if necessary). (Be specific)	
		· · · · · · · · · · · · · · · · · · ·
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<u>11 :</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares, issued shares, issued shares, issued shares, issued shares, is some some shares are shared shares.	
	(if not applicable, indicate N/A)	
		_

The date of each amendment(s) adoption:	, 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 block does not meet the applicable statutory filing requirements, this dadocument's effective date on the Department of State's records.	ne will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(by the shareholders was/were sufficient for approval.	s)
☐ 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):	ent
"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.	er
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
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 cour	
appointed fiduciary by that fiduciary)	`
(Typed or printed name of person signing)	

(Title of person signing)