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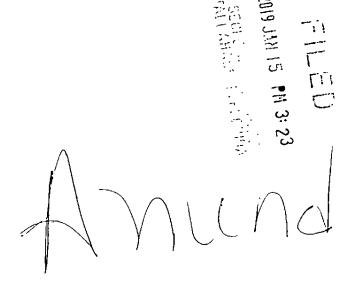
(Re	equestor's Name)		
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Prime Realty Serv	ice, Inc	
	BER:		
	of Amendment and fee are so	abmitted for filing.	
Please return all corre	espondence concerning this ma	itter to the following:	
	Nicole Kavanaugh		
		Name of Contact Person	1
	Prime Realty Service, Inc		
		Firm/ Company	
	1287 University Drive	. ,	
		Address	
	Coral Springs, FL 33071		
		City/ State and Zip Cod	e
sean	kavanaugh25@gmail.com		
		sed for future annual report	potification)
For further information	on concerning this matter, pleas	se cail:	
Nicole Kavanaugh		954	410-6229
Name of Contact Person		Area Co	dc & Daytime Telephone Number
Enclosed is a check for	or the following amount made		
■ \$35 Filing Fee	□\$43.75 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 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation 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: Nicole Kavanaugh Name of New Registered Agent 1287 University Drive (Florida street address) Coral Springs New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as regisfered 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 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 Doc		
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) Change	DP	Robyn Gomes	1287 University Drive	
Add			Coral Springs, FL 33071	
X Remove				
2) X Change	DP	Nicole Kavanaugh	1287 University Drive	
Add			Coral Springs, FL 33071	
Remove				
3) Change		=		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Damova				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable:	
(no mo	re than 90 days after amendment file date)
Note: If the date inserted in this block does not meet t document's effective date on the Department of State's re	he applicable statutory filing requirements, this date will not be listed as theords.
Adoption of Amendment(s) (CHECK O	<u>SE</u>)
The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval.	ders. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareho must be separately provided for each voting group en	
"The number of votes cast for the amendment(s)	was/were sufficient for approval
by	''
 The amendment(s) was/were adopted by the board of action was not required. The amendment(s) was/were adopted by the incorpora action was not required. 	
	other officer - if directors or officers have not been - if in the hands of a receiver, trustee, or other court iduciary)
Nicole Kavanaugh	
(Typed or	printed name of person signing)
President	
	(Title of person signing)