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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION:	rime Realty Service, Inc.
DOCUMENT NUMBER:	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
	Sean Kavanaugh Name of Contact Person Prime Realty Service, Inc. Firm/ Company 1287 University Dr. Address Coral Springs FL 33071 City/ State and Zip Code Sean Kavanaugh 25 @ gmail. com used for future annual report notification)
For further information concerning this matter, ple	ease call:
Name of Contact Person	at (954) 410 - 6229 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	
\$35 Filing Fee	Certified Copy (Additional copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

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P_i	rime Realty Service	In S
(Name of Corr	poration as currently filed with the Floric	la Dept. 648tate) 7 1 71 3: 35
ρ	03000115116	CEORRE LY OF STATE
(Document Number of Corporation (if know	CECRET OF GE STATE n) TALLAHASSEE, FL
rsuant to the provisions of section 607.1006, l Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Corpor</i> d	ation adopts the following amendment(s
If amending name, enter the new name of	f the corporation:	
		TheThe
me must be distinguishable and contain the we nc.," or Co.," or the designation "Corp," hartered," "professional association," or the	"Inc," or "Co". A professional corpore	orated" or the abbreviation "Corp.," attion name must contain the word
Enter new principal office address, if appl rincipal office address <u>MUST BE A STREE</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
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(Mailing address MAY BE A POST OFFICE If amending the registered agent and/or remove registered agent and/or the new registered.)	registered office address in Florida, enterstered office address: Sean Kavanaugh	
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If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent Name of New Registered Agent New Registered Office Address:	registered office address in Florida, enter stered office address: Sean Kavanaugh 1287 University To (Florida street address) (Oral Springs (City) The Registered Agent:	Pive Florida 33071 (Zip Code)
If amending the registered agent and/or renew registered agent and/or the new registered agent and/or the new registered Agent Name of New Registered Agent New Registered Office Address:	registered office address in Florida, enter stered office address: Sean Kavanaugh 1287 University To (Florida street address) (Oral Springs (City) The Registered Agent:	Pive Florida 33071 (Zip Code)
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Check if applicable

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X Change	PT Jol	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DP_	Nicole Kavanaugh	1287 University Dr.
Add Remove			Coral Springs FL 33071
2) Change	Db	Sean Kavanaugh	1287 University Dr.
<u> </u>			Coral Springs FL 33071
Remove 3) Remove			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

f 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)		al sheets, if necessa	ıry). (Be spec	cific)			
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	(if not app	licable, indicate N/	'A)	110110111111111111111111111111111111111			
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The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	tier amendment file date)
(no more than 90 days a	tier amendment file date)
Note: If the date inserted in this block does not meet the applicable sta document's effective date on the Department of State's records.	tutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the incorporators, or board of action was not required.	directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through vot must be separately provided for each voting group entitled to vote separately.	
"The number of votes cast for the amendment(s) was/were suffic	ent for approval
by	
by	
Dated	
Dated	
(By a director, president of other officer – if d	irectors or officers have not been
selected, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	of a receiver, trustee, or other court
Sean Kavar (Typed or printed name of	naugh
(Typed or printed name of	person signing)
President	
(Title of person signing)	_