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#### **COVER LETTER**

TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: CENTURY 21	ALL HOMES & PRO	PERTIES CO.	
DOCUMENT NUMBER: PO30	00125120		
The enclosed Articles of Amendment and fee are su	ibmitted for filing.		
·	-		
Please return all correspondence concerning this ma	itter to the following:		
KISH MUNJAL	_		
	Name of Contact Persor	1	
CENTURY 21 ALL	HOMES & PROP	PERTIES CO.	
	Firm/ Company	, ,	
2000 W. VINE	STREET		
	Address		
KISSIMMEE, F			
	City/ State and Zip Code	e	
C21KISH@GMAI	L.COM	,	
	sed for future annual report	notification)	
For further information concerning this matter, please	se call:		
KISH MUNJAL	at (407	343-1300	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	urtment of State:	
\$35 Filing Fee  \$35 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	Street .	Address	
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327		n of Corporations	
Tallahassee, FL 32314		Building xecutive Center Circle	

Tallahassee, FL 32301 ٠.,

#### Articles of Amendment to Articles of Incorporation

of

### CENTURY 21 ALL HOMES & PROPERTIES CO.

(Name of Corporation as current	125120	State	
(Document Number	er of Corporation (if known)		•
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit (	Cosporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the ALL HOMES & PROPER	<del></del>		
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Corp.," "prefessional association," or	word "corporation," "company, Corp." "Inc." or "Co". A prefes.	" or "incorporated" or the assignal corporation name must	_The new hbreviation contain the
B. Enter new principal office address, if applic (Principal c)fice address MUST BE A STREET	<u>able:</u> 4 <i>DDRESS</i> )		F11
J			IB PHIS:
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>	* 74 %	·
D. If amending the registered agent and/or reg		enter the name of the	
new registered agent and/or the new registe	red office address:		
Name of New Registered Agent			
	(Florida street address)		
New Registered C, fice Address:	(City)	, Florida	-
	(Cily)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		the obligations of the position.	
Signature o	f New Registered Agent of changing	ng	•

## 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, fnecessary)

Please note the cificer/director title by the first letter of the cifice title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive C, ficer; CFO = Chief Financial C, ficer. If an c; ficer/director holds more than one title, list the first letter cf each c, fice 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 Do	<u>ne</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
l)Change		<del></del>		
Add				
Remove				
2) Change		<del></del>		
Add				
Remove				
3) Change		<del></del>		
Add				
Remove				
4) Change				
Add				<u> </u>
Remove				
5) Change		_		-
Add				_
Remove				
6) Change		_		
Add				
Remove				

LATINOH DOMINOMAL BROOMS I MANAGERI L	icles, enter change(s) here:
(Attach additional sheets, f necessary).	(Be specific)
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and and an adment it not contained in the amendment itself:
(.f not applicable, indicate N/A)	numerical and contained in the amendment asert.
<del></del>	
	,

he date of each amendment(s) adoption: 12/12/12		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
action was not required.  The amendment(s) was/were ado	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
action was not required.		
Dated 12/12	/12	
selected	rector, president or other officer – if directors or officers have not been the distribution of the hands of a receiver, trustee, or other court field fiduciary by that fiduciary)	
	KISH MUNJAL	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	