## P03000157206

(Red	questor's Name)	<del>.</del>
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(City	y/State/Zip/Phone	#)
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(Bu	siness Entity Nam	ne)
(Do	cument Number)	
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## FLORIDA DEPARTMENT OF STATE Division of Corporations

July 5, 2018

561-251-7498

GLENN FEINMAN 12841 WOODMILL DR PALM BEACH GARDENS, FL 33418

SUBJECT: PROPERTY SOLUTIONS OF DELRAY, INC.

Ref. Number: P03000157206

We have received your document for PROPERTY SOLUTIONS OF DELRAY, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

If the corporation is a **PROFIT** corporation it must be signed 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 court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

The name of the person signing the document must be typed or printed beneath or opposite the signature.

The capacity of the person signing the document must be typed or printed beneath or opposite the signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 718A00013903

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

RECEIVED

18 JUL 17 PM 12: 4:9

SECRETARY OF DEATH
TALL AHASSEE TERM

## COVER LETTER

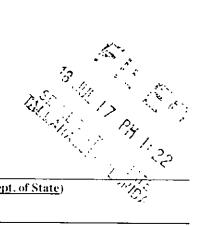
TO: Amendment Section Division of Corporations

NAME OF CORPORA	Property Solutions TION:	of Delray, Inc.	
DOCUMENT NUMBE	P03000157206		
The enclosed Articles of	Amendment and fee are su	abmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
G	lenn Feinman		
		Name of Contact Person	1
		Firm/ Company	
	841 Woodmill Drive		
Pa	dm Beach Gardens, FL 334	Address 418	
_		City/ State and Zip Cod	e
gfeinma	a_fl@yahoo.com		
	E-mail address; (to be u	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
Glenn Feinman		561 at (	251-7498 )
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	irtment of State:
■ \$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		Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle	

Tallahassee, FL 32301

Just trying to cheac address

## Articles of Amendment Articles of Incorporation $\mathbf{of}$



Property Solutions of Delray, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P03000157206 (Document Number of Corporation (if known)

nt(s) to

Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the following amendme	
A. If amending name, enter the new na	me of the corporation:			
		_	The new	
name must be distinguishable and com "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "	Co". A professional corpo	porated" or the abbreviation	
B. Enter new principal office address,	if applicable:	12841 Woodmill Drive		
(Principal office address MUST BE A ST		Palm Beach Gardens, FL	. 33418	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		12841 Woodmill Drive		
·		Palm Beach Gardens, FL	. 33418	
D. If amending the registered agent an new registered agent and/or the new			ame of the	
Name of New Registered Agent	Glenn Feinman			
	12841 Woodmill Drive			
	(Florida str	eet address)		
New Registered Office Address:	Palm Beach Gardens		33418 , Florida	
		(City)	(Zip Code)	

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>	<u>John Do</u>	<u>e</u>		
X Remove	$\underline{\mathbf{v}}$	Mike Jos	nes		
X Add	<u>sv</u>	Sally Sm	<u>nith</u>		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change		<del>_</del>			
Add					
Remove					
2) Change					
Add		_			
Remove					
3.) Change		_			
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Remove					
4) Change					
Add		_		•	
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5) Change				-	
Add					
Remove					
6) Change		_			
Add					
Remove					

	(Be specific)
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	<del></del>
Fun amendment arouids: For an aval	name replactification or cancellation of issued shares
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis and analysis and an analysis analysis and an analysis and an analysis analysis and an analysis
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable: (no more than 90 days after amendment file date)	
(no more man 10 days after amenament fac date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will necessarily document's effective date on the Department of State's records.	ot be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ 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):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.  ☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
action was not required.	
Dated 7/12/2018 Signature Slive Flori	
Signature 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 court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)  (Title of person signing)	
(Typed or printed name of person signing)	
17resident	
(Title of person signing)	