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	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone	· #)
PICK-UF	P WAIT	MAIL
	(Business Entity Nam	ne)
	(Document Number)	<u></u> -
Certified Copies	Certificates	of Status
Special Instructions	to Filing Officer:	•

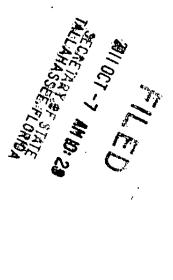




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ž v	<u>C</u>	COVER LETTER	
TO: Amendment Division of C	Section Corporations,	, A	a of
NAME OF COR			
DOCUMENT N	UMBER: <u>P040</u>	0000 51505	·
The enclosed Arti	icles of Amendment and fee ar	e submitted for filing.	
Please return all c	correspondence concerning this	s matter to the following:	
	Craig	me of Contact Person	
	Talen	Firm/Company	
	700 NE	Address	
	Miam; F	Ty/ State and Zip Code	
_	•	ent realty. Com	
For further inform	nation concerning this matter, p אמונס פעאסור e of Contact Person	olease call: at (954) 895-4 Area Code & Daytime Te	745 lephone Number
Enclosed is a chec	ck for the following amount ma	ade payable to the Florida Depar	tment 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)
P.O. Box 6	nt Section f Corporations	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ	le

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

(Name of Corporation as curr	ently filed with the Florid	la Dept. of State)	英国
P 0400	0051505		SSE
(Document Nun	nber of Corporation (if known	own)	
nuant to the provisions of section 607.100 ndment(s) to its Articles of Incorporation:	6, Florida Statutes, this I	Florida Profit Corporation	adore the Willow
f amending name, enter the new name o	f the corporation:		
Craix Gra	530, P.A.		The new
e must be distinguishable and contain	the word "corporation,"		rated" or the
reviation "Corp.," "Inc.," or Co.," or the e must contain the word "chartered," "pro	e designation "Corp," "In	c," or "Co". A profession the abbreviation "P A"	al corporation
e musi comuni ine word chartered, pro		· ·	L
Enter new principal office address, if app ncipal office address MUST BE A STREE	olicable: /0'	NE 90th Street	1
ncipui office uuuress <u>MOSI BE A SIKEE</u>	<u>(1 ADDRESS</u>) <u>M</u>	iami, FL 33138	
		•	
			
Enter new mailing address, if applicable	: (CE BOX) 700	NE 90th Street	
Enter new mailing address, if applicable Mailing address <u>MAY BE A POST OFFI</u>	: CE BOX) 700	NE 90th Street	
		NE 90th Street	
Mailing address <u>MAY BE A POST OFFI</u>			
Mailing address <u>MAY BE A POST OFFICE</u> f amending the registered agent and/or r	CE BOX) M\a registered office address		of the
Mailing address <u>MAY BE A POST OFFI</u>	CE BOX) M\a registered office address		of the
Mailing address <u>MAY BE A POST OFFICE</u> f amending the registered agent and/or r	CE BOX) M\a registered office address		of the
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Mailing address MAY BE A POST OFFICE f amending the registered agent and/or received registered agent and/or the new registered.	CE BOX) M\a registered office address	n Florida, enter the name	of the
Mailing address MAY BE A POST OFFICE f amending the registered agent and/or received agent and/or the new registered Agent:	registered office address:	n Florida, enter the name	
Mailing address MAY BE A POST OFFICE f amending the registered agent and/or received agent and/or the new registered Agent:	registered office address:	n Florida, enter the name	
Mailing address MAY BE A POST OFFICE f amending the registered agent and/or received agent and/or the new registered Agent:	registered office address: (Florida street of the control of the	n Florida, enter the name	

(Attach additional sheets, if necessary) **Type of Action** Title Name Address E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) Article III: The purpose for which this corporation is organized is: F. If 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)

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:

The date of each amendment(s	adoption:
1	(date of adoption is required)
Effective date <u>if applicable</u> :	no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval
by	**
(oting group)
action was not required.	adopted by the board of directors without shareholder action and shareholder adopted by the incorporators without shareholder action and shareholder
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)
	(Typed or printed name of person signing)
	(Title of person signing)
	(This of person signing)