P04000073625

(Requestor's Name)	_			
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(City/State/Zip/Phone #)	_			
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PICK-UP WAIT MAIL				
(Business Entity Name)	_			
(Document Number)				
Certified Copies Certificates of Status	-			
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Special Instructions to Filing Officer:				
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SECRETARY OF STATE

Amend + N/C

Office Use Only

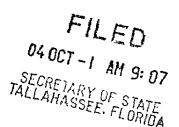
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF	CORPORATION: 4 Percent Realt	y of Destin, Inc	
DOCUMEN	NT NUMBER: P04000073625		
The enclosed	d Articles of Amendment and fee a	re submitted for filing.	
Please return	n all correspondence concerning thi	s matter to the following:	
	Donna J. Barber		
	(Name o	of Contact Person)	•
	4 Percent Realty of Destin, Inc		
	(Fir	m/ Company)	
	90 Beal Parkway NW Suite A2		
		(Address)	
	Ft Walton Beach, FL 32548		
For further i	nformation concerning this matter,	ate/ and Zip Code) please call:	
Donna J. Barber		at (<u>850</u>) <u>902-2946</u>	
	(Name of Contact Person)	(Area Code & Daytime	Telephone Number)
Enclosed is	a check for the following amount:		
□ \$35 Filing E	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 Corporation 409 E. Gaines Street Tallahassee, FL 32	rations eet

Articles of Amendment to
Articles of Incorporation of



4 Percent Realty of Destin, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

P04000013625
(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
4 Percent Realty of NW Florida, Inc
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
Article V: PRINCIPAL OFFICE AND MAILING ADDRESS: AMEND ADDRESS:
90 Beal Parkway Suite A2, Ft Walton Beach, Florida 32548
Article VI: REGISTERED AGENT AND INITIAL REGISTERED OFFICE: AMEND ADDRESS:
90 Beal Parkway NW Suite A2, Ft Walton Beach, FL 32548
Article VIII. INITIAL DIRECTORS: AMEND ADDRESS: 90 Beal Parkway NW Suite A2,
Ft Walton Beach, Florida 32548
Article IX: INCORPORATOR: AMEND ADDRESS 90 Beal Parkway NW, Suite A2,
Ft Walton Beach, FL 32548
(Attach additional pages if necessary)
If an amendment provides for 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
N/A

(continued)

The date of each amendment(s) adoption: September 29th, 2004
Effective date if applicable: October 1st, 2004
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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 cast for the amendment(s) was/were sufficient for approval by
(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.
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)
Donna J. Barber
(Typed or printed name of person signing)
Director
(Title of person signing)

FILING FEE: \$35