

P04000126185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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(Business Entity Name)

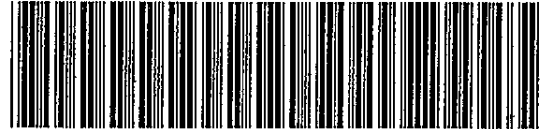
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3/22

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SFL Property Management, Inc.

DOCUMENT NUMBER: PO4000126185

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Amene Magloire

(Name of Contact Person)

SFL Property Management, Inc.

(Firm/ Company)

11440 NW 56th Drive, Suite 103

(Address)

Coral Springs, FL 33076

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Amene Magloire

(Name of Contact Person)

at (561) 541 9123
678) 360-8556

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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
409 E. Gaines Street
Tallahassee, FL 32399

Articles of Amendment
to
Articles of Incorporation
of

SFI Property Management, Inc.
(Name of corporation/as currently filed with the Florida Dept. of State)

PO4000126185

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(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)**

Officer/Director Detail

<u>Name + Address</u>	<u>Title</u>
1) Ismael Desilus 11440 NW 56th Drive - #103 Coral Springs, FL 33076	President
2) Rachel Magbire 11440 NW 56th Drive #103 Coral Springs, FL 33076	Vice President
3) Amene Magbire 11440 NW 56th Drive #103 Coral Springs, FL 33076	CFO

(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)

(continued)

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05 APR 18 AM 11:14
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

The date of each amendment(s) adoption: 1/14/05

Effective date if applicable: _____
(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.

Signed this 14th day of March, 2005

Signature Amene Magloire
(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)

Amene Magloire
(Typed or printed name of person signing)

Incorporator, CFO
(Title of person signing)

FILING FEE: \$35