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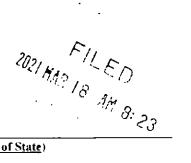
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	Douglas Layer, P.A RATION:					
DOCUMENT NUM	P05000004853 BER:					
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corre	spondence concerning this ma	tter to the following:				
	DOUGLAS P. LAYER					
	Name of Contact Person (after amendment) LAYER REAL ESTATE GROUP, INC.					
	1628 ANCHORAGE STREE	Firm/ Company				
	Address SARASOTA, FLORIDA 34231					
		City/ State and Zip Code	2			
	Douglayer@comcast.net					
	E-mail address: (to be us	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
DOUGLAS LAYER		941 at (	587-8777			
Name	of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	artment of State:			
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303				

## Articles of Amendment to Articles of Incorporation of



DOUGLAS LAYER P.A.

	of Corporation as currentl	y filed with the Florida Dept. of State)
P05000004853		
	(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new n	ame of the corporation:	
LAYER REAL ESTATE GROUP, INC.		The new
	lorp," "Inc," or "Co". 7	company," or "incorporated" or the abbreviation "Corp.," 1 professional corporation name must contain the word
D. C. A. L. C. L. C. L. Adams	Mr Mr. alla.	N/A
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>		
	,	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A
(Statung dauress STAT BE A POST	OFFICE BOX	
D. 16	- 4/	
<li>If amending the registered agent ar new registered agent and/or the new registered agent and/or the new registered.</li>	w registered office address	:
<del></del>	N/A	
Name of New Registered Agent	<del></del>	
	(Florida str N/A	eet address)
New Registered Office Address:		Florida
		(Cuy) (Zip Code)
	Louis Doning and America	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		<u>:</u> with and accept the obligations of the position.
. , .,		
	Signature of New R	egistered Agent, if changing
Check if applicable		

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	<u>John De</u>	<u>oc</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sr	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	<u>T</u>	_	DEBBIE LAYER	1628 Anchorage St Sarasota,FL
X Add				
Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

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			unalaccificatio	n or sonsallati	an of icenad char	ras:	
If an amendme	nt provides for	an exchange,	reclassificatio	n, or cancellati	on of issued shar	res,	
provisions for	implementing t	he amendmen	reclassificațio t if not conta	n, or cancellati ined in the ame	on of issued shar ndment itself:	res,	
provisions for	nt provides for implementing t licable, indicate	he amendmen	reclassificațio t if not conta	on, or cancellati ined in the ame	on of issued shar ndment itself:	res,	
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provisions for (if not app	implementing t	he amendmen	reclassificațio	n, or cancellati	on of issued share	res.	

	03/17/2021	
The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
03/17/20	121	
Effective date <u>if applicable</u> :		
	(no more than 90 days afte	er amendment file date)
Note: If the date inserted in this block document's effective date on the Depar	c does not meet the applicable statu tment of State's records.	ntory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of d	irectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffice		of votes cast for the amendment(s)
☐ The amendment(s) was/were approv must be separately provided for each "The number of votes cast for		rately on the amendment(s):
The number of votes east for	the amendment(s) was were surficie	н ю аррюча
by		<del></del> ."
	(voting group)	
Dated	17/2021	
Signature	15 huge	
(By a direct	or, president or other micer - if dir	ectors or officers have not been
	y an incorporator of in the hands of	fa receiver, trustee, or other court
appointed t	fiduciary by that fiduciary)	
DC	OUGLAS P. LAYER	
	(Typed or printed name of p	erson signing)
PR	ESIDENT	
	(Title of person signing)	