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(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	
(Ĉi	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION:	Jana Ritter, P.A.
DOCUMENT NUMBER: YOSO	000127105
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
-	Name of Contact Person
	Jana Ritter, PA Firm/ Company
173	
	3 Meridian Ave., #12
Mian	City/ State and Zip Code
•	City/ State and Zip Code
ana ti	ttes 1 @ gmail. Com used for future annual report notification)
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Name of Contact Person	at (305) 799-0255 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
\$35 Filing Fee & Certificate of Status	
Mailing Address Amendment Section	Street Address Amendment Section
Division of Corporations	Amendment Section Division of Corporations
P.O. Pov 6227	Cliffon Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation
Jana Ritter PA
(Name of Corporation as currently filed with the Florida Dept. of State)
PO50000127105
(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:
A. If amending name, enter the new name of the corporation:
Miami Prime Properties, PA The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the
new registered agent and/or the new registered office address:
Name of New Registered Agent
56 G
(Florida street address)
New Registered Office Address:, 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.
Signature of New Registered Agent, if changing

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 <math>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>	John Doe		
X Remove	$\underline{\mathbf{v}}$	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name		<u>Addres</u> s
1) Change Add Remove	<u> </u>		NP	
2) Change Add Remove				
3) Change Add Remove			·	
4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove			·····	

ttach additional she	ng additional A ets, if necessary,). (Be specific	;)		
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· · · · · · · · · · · · · · · · · · ·		N	A		
V 				· · · · · · · · · · · · · · · · · · ·	
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			N. M.		

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an amendment pro rovisions for imple (if not applicable	menting the am	change, reclass iendment if no	ification, or car contained in t	icellation of issume amendment it	ed shares, self:
		\ ^			
		N/A			
		· • · · · · · · · · · · · · · · · · · ·			

The date of each a	mendment(s) adoption:
Effective date <u>if a</u>	pplicable: $2-24-2012$
	(no more than 90 days after amendment file date)
Adoption of Amen	edment(s) (CHECK ONE)
	c(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.
	e(s) was/were approved by the shareholders through voting groups. The following statement tely provided for each voting group entitled to vote separately on the amendment(s):
"The num	ber of votes cast for the amendment(s) was/were sufficient for approval
by	(voting group)
The amendment action was not re	c(s) was/were adopted by the board of directors without shareholder action and shareholder equired.
The amendment action was not re	c(s) was/were adopted by the incorporators without shareholder action and shareholder equired.
<u>.</u> I	Dated 2-23-2012
s	Signature Cana ()
	(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 of printed name of person signing)
	<u>Owner</u>
	(Title of person signing)