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(Ad	ldress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	_{ation:} <u>Citimax Co</u>	rporation	1	
DOCUMENT NUMBI	ER: P0600005314	1		· · · · · · · · ·
	f Amendment and fee are su		ing.	
Please return all corresp	ondence concerning this ma	tter to the follo	owing:	
[Robert W. Fernar	ndez		
_		Name of C	ontact Person	
•	Citimax Corporati	ion		
_		Firm/ (Company	
	11021 US Highw	ay 301 S	South	
_		Ad	dress	
	Riverview, Florida	a 33578		
-		City/ State	and Zip Code	
Rob	@Realestay.com	า		
	E-mail address: (to be us		nnual report	notification)
For further information	concerning this matter, pleas	se call:		
Robert W. Fe	rnandez	ot.	813	、784-2264
Name o	f Contact Person	aı		le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the	Florida Depa	rtment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified (Addition: enclosed)	Copy al copy is	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314		Amendi Division Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

Citimax Corporation		25	
(Name of Corporation as currently filed with the Florida Dept. of State)	2:		**************************************
P06000053141	25	<u></u>	دو: ایزنیاویز _{در} سامتنانو که لیب
(Document Number of Corporation (if known)	m _e .	PH	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the its Articles of Incorporation: A. If amending name, enter the new name of the corporation:	e following ORID		
Realestay Corporation			
name must be distinguishable and contain the word "corporation," "company," or "incorporated" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation naword "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable:		- breviat	
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:	<u>e</u>		
Name of New Registered Agent			
(Florida street address)			
New Registered Office Address:, Florida		-	
(City) (Zip	o 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 Do	<u>e</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sm	<u>uith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
4) Change		_		
Add				
Kemove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Pamova				

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
· · · · · · · · · · · · · · · · · · ·	 	
· · · · · · · · · · · · · · · · · · ·		
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,	
provisions for implementing the amer	ndment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption: August 9th, 2012 August 9th, 2012 Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted 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 (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. Dated August 9th, 2012 Signature (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the kands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) Robert W. Fernandez (Typed or printed name of person signing) President and Director

(Title of person signing)