

(Requestor's Name)  (Address)	800102997198
(City/State/Zip/Phone #)	05/24/0701053001 **35.00
(Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	SECRETARY OF TALLAHASSEE.
Special Instructions to Filing Officer:	AM 8: 4.5 SEE, FLORIDA

Office Use Only

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: HOMELA	ND Florisa REALTY, I	NC
DOCUMENT NUMBER: P07.0000	53687	
The enclosed Articles of Amendment and fee are su	ubmitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
JOAN E. ZABA (Name of Co	entact Person)	
HomEland Florid	a Realty INC,	
10207 FACET C	OURT dress)	
ORIANDO FL (City/ State a	3 2 8 3 6 and Zip Code)	
For further information concerning this matter, plea	ase call:	
JOAN ZABAR (Name of Contact Person)	at ( 407 ) 363 – 1884 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	,	
\$35 Filing Fee  \$\sum \text{\$\$S35 Filing Fee & Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of St (Additional copy is enclosed) (Additional Copy is enclosed)	
Mailing Address Amendment Section	Street Address Amendment Section	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation**



HOMELAND FLORIDA REALTY INC
(Name of corporation as currently filed with the Florida Dept. of State)

Po7 000053687
(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)
Please add the Jollowing: JOAN É. ZABAR, 10207 FACET COURT as President, Secretary, Treasurery director
10207 FACET COURT as President, Secretary,
TreasurerEdirector
(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)
(constituted)
(continued)

The date of e	ach amendment(s) adoption: 5-20-07
Effective date	e if applicable: (no more than 90 days after amendment file date)
Adoption of A	Amendment(s) (CHECK ONE)
	e amendment(s) was/were approved by the shareholders. The number of votes cast for amendment(s) by the shareholders was/were sufficient for approval.
fol	e amendment(s) was/were approved by the shareholders through voting groups. The lowing statement must be separately provided for each voting group entitled to vote parately on the amendment(s):
	"The number of votes cast for the amendment(s) was/were sufficient for approval by
	(voting group)
	e amendment(s) was/were adopted by the board of directors without shareholder action d shareholder action was not required.
Th sha	e amendment(s) was/were adopted by the incorporators without shareholder action and areholder action was not required.
	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)  [Typed or printed name of person signing]  [Title of person signing]
	President (Title of person signing)

FILING FEE: \$35