

P07000095558

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(Address)

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TALLAHASSEE FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** TAMARA SABBAGH PA

**DOCUMENT NUMBER:** P07000095558

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

Please return all correspondence concerning this matter to the following:

TAMARA SABBAGH DELISLE

Name of Contact Person

TAMARA SABBAGH PA

Firm/ Company

5790 JOHNSON ST

Address

HOLLYWOOD FL 33021

City/ State and Zip Code

TAMARA@AIOPROPERTY.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TAMARA SABBAGH DELISLE at ( 954 ) 251 0181

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 17, 2012

TAMARA SABBAGH DELISLE  
5790 JOHNSON ST  
HOLLYWOOD, FL 33021

SUBJECT: TAMARA SABBAGH, P.A.  
Ref. Number: P07000095558

We have received your document for TAMARA SABBAGH, P.A. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption/authorization of this document must be a date on or prior to submitting the document to this office, and this date must be specifically stated in the document. If you wish to have a future effective date, you must include the date of adoption/authorization and the effective date. The date of adoption/authorization is the date the document was approved.

If the corporation is a **PROFIT** corporation it must be signed 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.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Carol Mustain  
Regulatory Specialist II

Letter Number: 812A00029749

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## Facsimile Transmittal

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# FAX

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**To:** Carol Mustang

**From:** TAMARA SABBAGH-  
DELISLE

**Company:**

**Date:** 01/03/2013

**Fax Number:** 8502456897

**Pages:** 1 (including cover page)

**Re:** Dissolution

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**Comments:**

**Hi Carol**

**Just wanted to confirm that I dissolved Auo Realty & Property Management Inv  
and it is not my intention to dispute dissolution in the future.**

**Confirmation code: 000243276110**

**Document # P12000104072**

**Thanks**

**Tamara Sabbagh  
954 471 8904**

Articles of Amendment  
to  
Articles of Incorporation  
of

P07000095558

(Name of Corporation as currently filed with the Florida Dept. of State)

TAMARA SABBAGH, P.A.

(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:

**A. If amending name, enter the new name of the corporation:**

AIO REALTY & PROPERTY MANAGEMENT, INC

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)

5790 JOHNSON ST

HOLLYWOOD FL 33021

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

5790 JOHNSON ST

HOLLYWOOD FL 33021

**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

TAMARA SABBAGH DELISLE

5790 JOHNSON ST

(Florida street address)

New Registered Office Address:

HOLLYWOOD

, Florida

33021

(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 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                      PT      John Doe

X Remove                      V      Mike Jones

X Add                              SV      Sally Smith

| Type of Action<br>(Check One) | Title    | Name                          | Address                   |
|-------------------------------|----------|-------------------------------|---------------------------|
| 1) <u>X</u> Change            | <u>P</u> | <u>TAMARA SABBAGH DELISLE</u> | <u>5790 JOHNSON ST</u>    |
| <u>      </u> Add             |          |                               | <u>HOLLYWOOD FL 33021</u> |
| <u>      </u> Remove          |          |                               |                           |
| 2) <u>      </u> Change       |          |                               |                           |
| <u>      </u> Add             |          |                               |                           |
| <u>      </u> Remove          |          |                               |                           |
| 3) <u>      </u> Change       |          |                               |                           |
| <u>      </u> Add             |          |                               |                           |
| <u>      </u> Remove          |          |                               |                           |
| 4) <u>      </u> Change       |          |                               |                           |
| <u>      </u> Add             |          |                               |                           |
| <u>      </u> Remove          |          |                               |                           |
| 5) <u>      </u> Change       |          |                               |                           |
| <u>      </u> Add             |          |                               |                           |
| <u>      </u> Remove          |          |                               |                           |
| 6) <u>      </u> Change       |          |                               |                           |
| <u>      </u> Add             |          |                               |                           |
| <u>      </u> Remove          |          |                               |                           |

**E. If amending or adding additional Articles, enter change(s) here:**

*(Attach additional sheets, if necessary). (Be specific)*

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**F. If an amendment provides for an 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)*

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The date of each amendment(s) adoption:

~~JANUARY 1 2013~~ <sup>(12)</sup>

December 12 2012

Effective date if applicable:

JANUARY 1 2013

(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

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.

Dated 12/12/12

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)

TAMARA SABBAGH DELISLE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)