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COVER LETTER

TO: Amendment Sect Division of Corpo			
NAME OF CORPOR	RATION: RRTM, PA	,	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are si	ibmitted for filing.	
Please return all corres	spondence concerning this ma	itter to the following:	
	EDWARD STEVEN ROGE	RS	
		Name of Contact Person	n
	EDWARD STEVEN ROGE	RS, PA	
		Firm/ Company	
	7191 SW 99 CIRCLE		
		Address	
	OCALA FL 34481		
		City/ State and Zip Code	е
EDO	CALAREALTYWORLD@G	MAIL COM	
	_	sed for future annual report	notification)
	C-sum andress for he m	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
EDWARD S ROGERS		at (257-0303
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
	ling Address		Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circle	
			issee, FL 32301

Articles of Amendment to Articles of Incorporation

of		Zω
	_	L C
f Corporation as currently	fled with the Florida Dept. of State)	
		\$\$. \$\$
(Document Number of	Corporation (if known)	
1006, Florida Statutes, this F	Florida Profit Corporation adopts the follow	wing anendmen
		중국
me of the corporation:		
		The new
cable: OFFICE BOX)	in Elouida autor the runns of the	
d/or registered office address; v registered office address;	ess in Florida, enter the name of the	
EDWARD STEVEN ROG	ERS	
7191 SW 99 CIRCLE		
(Florida stre	et address)	
OCALA	, Florida,	1
(Ciry) (a	Zip Code)
		on.
	(Document Number of 1006, Florida Statutes, this I me of the corporation: ain the word "corporation ation "Corp," "Inc," or "Corporation ation "Corp," "Inc," or "Corporation ation," or the abbreviation "I of applicable: TREET ADDRESS) Cable: OFFICE BOX) difor registered office address: EDWARD STEVEN ROG 7191 SW 99 CIRCLE (Florida street) OCALA	(Document Number of Corporation (if known) 1006, Florida Statutes, this Florida Profit Corporation adopts the following of the corporation: It word "corporation: It word "corporation," "company," or "incorporated" or the ation "Corp," "Inc," or "Co". A professional corporation name in the modern of the abbreviation "P.A." If applicable: Company Florida Florida Florida Florida

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.

X Change	<u>PT</u> <u>John</u>	n Doc	
X Remove	Y Mik	e Jones	
_X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P, S	RHONDA ROGERS,	7191 SW 99 CIRCLE
Add			OCALA FL 34481
X Remove			
2) Change	P,S	EDWARD STEVEN ROGERS	7191 SW 99 CIRCLE
X Add			OCALA FL 34481
Remove			Constitution and think or a way annual and, always some, at a unauguating annique
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change	·		
Add			
Remove			
6) Change			
Add	AAA war mark makee w		***************************************
Remove			

If amending or adding additional Articles, enter change(s) he (Attach additional sheets, if necessary). (Be specific)	ere:
O OPERATE AS A REAL ESTATE SALES AGENT	
	· · · · · · · · · · · · · · · · · · ·
THE NOTE OF THE PARTY OF THE PA	· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exchange, reclassification, of provisions for implementing the amendment if not contained (if not applicable, indicate N/A)	or cancellation of issued shares, I in the amendment itself:

Whater to the second	9/8/2016	
The date of each amendment(s) adopted date this document was signed.	On:	, if other than th
v		
Effective date If applicable: 9/8/2016		
I HODRENDIE	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block of document's effective date on the Departm	does not meet the applicable statutory filing requirements, this cannot of State's records.	date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes east for the amendment for approval.	(s)
	by the shareholders through voting groups. The following states voting group entitled to vote separately on the amendment(s):	rent
	e amendment(s) was/were sufficient for approval	
by	39	
	(voting group)	
☐ The amendment(s) was/were adopted baction was not required.	by the board of directors without shareholder action and sharehold	icr
The amendment(s) was/were adopted by action was not required. Dated Signature (x)	by the incorporators without shareholder action and shareholder	
(By a director	r, president or other officer - if directors or officers have not been	
selected, by a	in incorporator if in the hands of a receiver, trustee, or other cou	ırt
appointed fid	uciary by that fiduciary)	
E	ついれたり ちていされ 学むのはれる (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESIDENT	
,	(Title of person signing)	