

| (Rec                                    | questor's Name)   |                 |  |
|---|-------------------|-----------------|--|
| (Address)                               |                   |                 |  |
| (Add                                    | lress)            |                 |  |
| (City                                   | //State/Zip/Phone | <del>;</del> #) |  |
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APP 19 20

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R. WHITE

## **COVER LETTER**

| Division of Corporations   |  |  |  |  |  |
|--|--|--|--|--|--|
| NAME OF CORPORATION: Nom Real Operating Inc.   |  |  |  |  |  |
| DOCUMENT NUMBER: <u>P08000</u> 33712.  |  |  |  |  |  |
| The enclosed Articles of Amendment and fee are submitted for filing.   |  |  |  |  |  |
| Please return all correspondence concerning this matter to the following:  |  |  |  |  |  |
| Salvater arena<br>Name of Contact Person   |  |  |  |  |  |
| MPM Keal Operating Unc.  |  |  |  |  |  |
| 2900 Hempstead Toke Surte 112  |  |  |  |  |  |
| Leuterun, MJ 11756   |  |  |  |  |  |
| City/ State and Zip Code   |  |  |  |  |  |
| NPM Real (a) gmail com   |  |  |  |  |  |
| E-mail address. (to be used for future annual report notification)   |  |  |  |  |  |
| For further information concerning this matter, please call:   |  |  |  |  |  |
| Taret Sejesus at 516, 735 0754   |  |  |  |  |  |
| 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 Certificate of Status Certified Copy (Additional copy is enclosed)  \$35 Filing Fee & Certified Copy (Additional Copy is enclosed) |  |  |  |  |  |

Mailing Address
Amendment Section

TO: 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

## **Articles of Amendment** to

| 17 | APR | 18 | PH | 2: | 16 |
|----|-----|----|----|----|----|
|----|-----|----|----|----|----|

|   | Articles of Inco         | orporation          | 17 APR 18             | PH 2:15                               |
|---|--------------------------|---------------------|-----------------------|---------------------------------------|
| Min Real &  | Derakky                  | Unc.                |                       |                                       |
| (Name of Con  | rporation as currently   | filed with the Fl   | orida Dept. of State  | ··· · · · · · · · · · · · · · · · · · |
| P0800033  | 3412                     |                     |                       |                                       |
|   | (Document Number of      | Corporation (if kn  | own)                  |                                       |
| cursuant to the provisions of section 607.1006, as Articles of Incorporation:   | Florida Statutes, this I | Florida Profit Cor  | poration adopts the   | following amendment(s)                |
| . If amending name, enter the new name o  | f the corporation:       |                     |                       |                                       |
|   |                          |                     |                       | The new                               |
| name must be distinguishable and contain t<br>"Corp.," "Inc.," or Co.," or the designation<br>word "chartered," "professional association," | "Corp," "Inc," or "(     | Co". A profession   |                       |                                       |
| 3. Enter new principal office address, if app<br>Principal office address <u>MUST BE A STREE</u>  |                          |                     |                       | · · · · · · · · · · · · · · · · · · · |
|   |                          |                     |                       |                                       |
| C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI   |                          |                     |                       |                                       |
|   |                          |                     |                       |                                       |
| D. If amending the registered agent and/or i  | registered office addr   | ess in Florida, en  | ter the name of the   |                                       |
| new registered agent and/or the new regi  | istered office address:  |                     |                       |                                       |
| Name of New Registered Agent  |                          |                     |                       | · · · · · · · · · · · · · · · · · · · |
|   |                          |                     |                       |                                       |
|   | (Florida stre            | eet address)        |                       |                                       |
| New Registered Office Address:  |                          |                     | , Florida_            |                                       |
|   |                          | (City)              |                       | (Zip Code)                            |
|   |                          |                     |                       |                                       |
| lew Registered Agent's Signature, if changi   | ng Registered Agent:     |                     |                       |                                       |
| hereby accept the appointment as registered a   |                          | rith and accept the | obligations of the pe | osition.                              |
|   |                          |                     |                       |                                       |
|   |                          |                     |                       |                                       |
|   | Signature of New Re      | egistered Agent, if | changing              | <del></del> _                         |

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 I              | <u> </u>             |  |
|--|------------------------|----------------------|--|
| X Remove   | <u>V</u> <u>Mike J</u> | <u>Iones</u>         |  |
| X Add  | SV Sally S             | <u>Smith</u>         |  |
| Type of Action (Check One)  1) Change Add Remove | Title V.               | Name<br>_ Matt Ham's | Address  HOI NE 57th Place  Apt 10  Fort lauderdale, Th 33 |
| 2) Change Add Remove 3 ) Change Add              |                        |                      |  |
| Remove 4) Change Add Remove                      |                        |                      |  |
| 5) Change Add Remove                             |                        |                      |  |
| 6) Change Add                                    | <del></del>            |                      |  |

| Attach additional s | ding additional Articl<br>heets, if necessary).                      | (Be specific)                         |   |                                       |                                       |   |
|---------------------|--|---------------------------------------|---|---------------------------------------|---------------------------------------|---|
|                     |  |                                       |   |                                       |                                       |   |
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|                     |  |                                       |   |                                       | · · · · · · · · · · · · · · · · · · · |   |
| provisions for im   | provides for an excha<br>plementing the amend<br>able, indicate N/A) | nge, reclassifica<br>dment if not con | tion, or cancellat<br>tained in the amo | ion of issued shar<br>endment itself: | es,                                   |   |
|                     |  |                                       |   |                                       |                                       |   |
|                     |  |                                       |   |                                       | ·····                                 | · |
|                     |  |                                       |   |                                       |                                       |   |
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|                     |  |                                       |   |                                       |                                       |   |
|                     |  |                                       |   |                                       |                                       |   |

| The date of each amendment(s) adoption: date this document was signed.                                       | , if other than   |
|--|---|
| Effective date if applicable:  |   |
| (no n  | ore than 90 days after amendment file date)   |
| Note: If the date inserted in this block does not mee document's effective date on the Department of State's | t the applicable statutory filing requirements, this date will not be listed as records.                |
| Adoption of Amendment(s) (CHECK (  | <u>ONE</u> )  |
| ☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approva                      | olders. The number of votes cast for the amendment(s)   |
| ☐ The amendment(s) was/were approved by the share must be separately provided for each voting group          | nolders through voting groups. The following statement entitled to vote separately on the amendment(s): |
| "The number of votes cast for the amendment  | (s) was/were sufficient for approval  |
| by(voting gro  | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |
| (voting gro  | rup)  |
| ☐ The amendment(s) was/were adopted by the board of action was not required.                                 | of directors without shareholder action and shareholder   |
| The amendment(s) was/were adopted by the incorporaction was not required.                                    |   |
| Dated 4/12/17  | other officer – if directors or officers have not been  |
| Signature  |   |
| (By a director, president of selected, by an incorporate appointed fiduciary by that                         | or – if in the hands of a receiver, trustee, or other court   |
| Salva  | or printed name of person signing)  |
| (Typed   | or printed name of person signing)  |
| Pres   | dent  |
|  | (Title of person signing)   |

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