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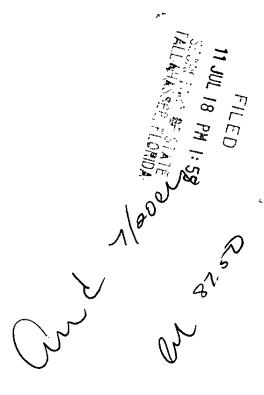
(R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: MCtrop	politan Realty Associates, Inc.
DOCUMENT NUMBER: PO8000)36314
The enclosed Articles of Amendment and fee are se	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
Wilfred	of Contact Person
Metropolitan	Realty Associates, Inc.
3180 Munro	Address Address
Coconut Gro	State and Zip Code
E-mail address: (to be used for	future annual report notification)
For further information concerning this matter, please Wilfredo J. Montejo Name of Contact Person	269-0278
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 & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed) 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

Articles of Amendment

to

Articles of Incorporation of

ing
3

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)

<u>Title</u>	Name	Address	Type of Action
PID	Luis. A. Sastrques	5 306 NW 114 AVC # Miami, Fl 33172	107
210	Wilfredo I Montejo	3180 Monroe P Coconot Grove 33133	Add FI Remove
	ing or adding additional Articles, enter distinct of the distribution of the distribut		
X See a	eldached Resignation	- 0:5 A - 1:4	
	TO THE WAY		
provisio	nendment provides for an exchange, rec ns for implementing the amendment if of applicable, indicate N/A)		
100 · 1.	of shares will be	issued to Wi	Ifredo I
Mont			
		,	

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Luis A. Sastriques (Name of Registered Agent)
hereby resigns as Registered Agent for Metropolitan Realty Associates, From (Name of Corporation)
P 0 80000 363 14 (Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed. Signature of Resigning Agen
If signing on behalf of an entity:
Luis A. Sastriques (Typed or Printed Name)
President/Director.

Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

The date of each amendment(s) adoption: $3/11/201/$
Effective date if applicable: 3 11 2011
(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
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 3 1 291 Signature Signature Signature Signature Secretary Association in the secretary and
(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)
Luis A. Sastriques. (Typed or printed name of person signing)
(Title of person signing)