P08000054435

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COVER LETTER

				
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•		<u>COVER LETTER</u>		
TO: Amendment Section Division of Corpo				THE OFFICE AND THE PARTY OF THE
NAME OF CORPOR	RATION: Cardwell & Assoc	iates Real Estate Inc		The State of the S
	BER: P08000054435			
The enclosed Articles	of Amendment and fee are su	abmitted for filing.		5 -
Please return all corres	spondence concerning this ma	itter to the following:		
	Johnnie F. Cardwell			
		Name of Contact Person	13	
	Cardwell & Associates Real	Estate Inc		
		Firm/ Company		
	4500 Twin Oaks Drive			
		Address		
	Pensacola, Florida 32506			
	-	City/ State and Zip Cod	e	
	W251 H			
cardw	rellj@bellsouth.net	10000		
	E-man address: (to be th	sed for future annual report	nonneation)	
For further information	n concerning this matter, plea	se call;		
Johnnie F. Caredwell	н	850 at (503-8088	
Name o	of Contact Person		de & Daytime Telephone Number	_
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐S43.75 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)	
	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		

Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

(Name of Corporation as curren	itly filed with the Flor		1 Estates I
<i>F08.0</i>	111	ida Dept. of State)	
	000544	<i>35</i>	
(Document Number	of Corporation (if know	wn)	
suant to the provisions of section 607,1006, Florida Statutes, the Articles of Incorporation:	is Florida Profit Corpo	pration adopts the following a	emendment(s) to
If amending name, enter the new name of the corporation:			
	.5		he new
ne must be distinguishable and contain the word "corporatorp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or d "chartered," "professional association," or the abbreviation	"Co". A professiona		
Enter new principal office address, if applicable:	N/A		-21
incipal office address MUST BE A STREET ADDRESS)			0 1
	-	····	- 8
	,		
Enter new mailing address, if applicable:	N/A		艺
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
<u>If amending the registered agent and/or registered office ad</u> new registered agent and/or the new registered office addre		r the name of the	
N/A	<u> </u>		
Name of New Registered Agent	.,		
(El. vii.l.)	street address)		
	sireet adaressy		
New Registered Office Address:	(Citv)	, Florida(Zip Co	der
		,,	•
y Registered Agent's Signature, if changing Registered Agenterby accept the appointment as registered agent. I am familia			

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	TCFO	Jennifer M. Cardwell	5569 Shadow Grove Blvd
XAdd			Pensacola, FL 32526
Remove			
2) Change		_	
Add			
Remove			
3) Change		_	
Add			
Remove			
4) Change		 	
Add			
Remove			
51 Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
/A	
	<u> </u>
	-
· · · · · · · · · · · · · · · · · · ·	<u>.</u>
· · · · · · · · · · · · · · · · · · ·	_
If an amendment provides for an exchange, reclassification, or cancellation of issued shar	'es _s
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A) /A	
· · · · · · · · · · · · · · · · · · ·	
· · · · · · · · · · · · · · · · · · ·	
	<u></u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90) da	ys after amendment file date,
Note: If the date inserted in this block does not meet the applicable document's effective date on the Department of State's records.	statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes east for the amendment(s) was/were su	fficient for approval
by	
(voting group)	
■ The amendment(s) was/were adopted by the board of directors with action was not required.	nout shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
November 27, 2017 Dated	
Signatural Manual Manua	
(By a director, president or other officer – selected, by an incorporator – if in the har appointed fiduciary by that fiduciary)	
Johnnie F. Cardwell	
(Typed or printed name	e of person signing)
President	
(Title of pe	erson signing)