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SECRETARY OF STATE
TALLAHASSEE, FLORID.

10/30/08

COVER LETTER

. TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Palm Cit	y Kealtors Inc			
DOCUMENT NUMBER: P08000075154				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Jeffrey D. Klein (Name of Contact Person)				
(Firm/ Company)				
P.O. Box 2164 (Address)				
Palm City FL 3499/ (City/ State and Zip Code)				
For further information concerning this matter, please call:				
Jeffey D. Klein at (Name of Contact Person)	$\frac{72}{\text{(Area Code & Daytime Telephone Number)}}$			
Enclosed is a check for the following amount made payable to the Florida Department of State:				
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Amendment Section American Division of Corporations Division P.O. Box 6327 Cliftor Tallahassee, FL 32314 2661	et Address Industrial Address In			

Articles of Amendment

to Articles of Incorporation

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\sim \sim \sim	rently filed with the Florida Dept. 6A\$	MENASSEE FLORIDA
<u> </u>		
(Document Nu	mber of Corporation (if known)	
Pursuant to the provisions of section 607.100 following amendment(s) to its Articles of Incomparison of the control of the con		it Corporation adopts the
A. If amending name, enter the new name of the	al Estate 4. and contain the word "corporation, "Inc.," or Co.," or the designation	"Corp," "Inc," or
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)		
D. If amending the registered agent and/or new registered agent and/or the new reg		nter the name of the
Name of New Registered Agent:	 	
New Registered Office Address:	(Florida street address)	<u> </u>
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changer I hereby accept the appointment as registere position.		ept the obligations of the
- ,	Signature of New Registered Agent, if ch	anging

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) Address **Type of Action** <u>Title</u> <u>Name</u> 🔲 Add ☐ Remove _____ Add ☐ Remove _____ 🗖 Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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)