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AUG 3 1 2012 T. ROBERTS

COVER LETTER

TO	: Amendment Section	
·r	Division of Corporations	

NAME OF CORPORATION: PLBAILEY 199ACTY, \$10C DOCUMENT NUMBER: PDS PPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPPP
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person S. I. BAILEY PRACTY, EMC Firm/ Company P. O. BOX 370 Address WHILE FLORINA City/ State and Zip Code DOBO RL BAILEY POALTY. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
1306 1311467 at 289 831-5319 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 \$\begin{array}{cccccccccccccccccccccccccccccccccccc

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

is enclosed)

Articles of Amendment to Articles of Incorporation

of				
RL BAILEY REALTY, INC.				
(Name of Corporation as currently filed with the Florida Dept. of State)				
PA 8 DDD A 76933				
(Document Number of Corporation (if known)				
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
A. If amending name, enter the new name of the corporation:				
MIA				
The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation				
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 678 B B B B B B B B B B B B B B B B B B B				
ISLAND PLAZA BUGINESS				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)				
678 B BACK CAG(6				
MARCO ISLAND PAIDE				
C. Enter new mailing address, if applicable: FLORIDA, 34145				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
(Musing success MAT BLATOST OTTICL BOX)				
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:				
M. W				
Name of New Registered Agent				
(Florida street address)				
New Registered Office Address: , Florida , Florida				
(City) (Zip Code)				
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				
NIE				
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.

Example: X_Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones	N	
X Add	<u>sv</u>	Sally Smith	WA	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
Remove				
6) Change				
Add				
Remove				

amending or adding additional Articles, enter ttach additional sheets, if necessary). (Be spec	cific)
	A
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an amendment provides for an exchange, rec provisions for implementing the amendment if	lassification, or cancellation of issued shares, I not contained in the amendment itself:
(if not applicable, indicate N/A)	11
	<i>y</i>

The date of each amendment(s) adoption:					
Effective date if applicable:	(no more than 90 days after amendment file date)				
	(no more than 30 days after amenament file date)				
Adoption of Amendment(s)	(CHECK ONE)				
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.				
	ere approved by the shareholders through voting groups. The following statement ded for each voting group entitled to vote separately on the amendment(s):				
"The number of vote	es cast for the amendment(s) was/were sufficient for approval				
, by <u> </u>	(voting group)				
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder				
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder				
Dated	8-29-12				
Signature _					
5	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)				
	(Typed or printed name of person signing)				
	SEO				
	(Title of person signing)				