P0800103039

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: St Lucie River Realty Inc DOCUMENT NUMBER: <u>P0</u>8000103039 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: G.F. Hoge Name of Contact Person Traditional Realty Co. Firm/ Company 10380 SW Village Center Dr. #109 Address Port St Lucie, FL 34987 City/ State and Zip Code Geof@TraditionLife.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: G.F. Hoge at (772) 216-7005

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$43.75 Filing Fee & Certified Copy □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

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

St Lucie River Realty Inc	
(Name of Corporation as currently filed with the Florida Dept. of State)	
P08000103039	
(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 amend its Articles of Incorporation:	ment(s) to
A. If amending name, enter the new name of the corporation:	
Traditional Realty Co.	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	ion
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) HITT OFFICE 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:	U
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
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. 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	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change			
Add			
Remove			<i></i>
2) Change			/
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		/	
Add			
Remove			
5) Change	_	/ 	
Add			
Remove	/		
6) Change			
Add			
Remove			

mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)	
in amendment provides for an exchange, reclassification, or canc	ellation of issued shares.
ovisions for implementing the amendment if not contained in the	amendment itself:
(if not applicable, indicate N/A)	
	

The date of each amendment(s) adoption: 1 May 2014	, if other than the
date this document was signed.	
Effective date if applicable: 1 May 2014	
(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"	
(voting group)	
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 29 April 2014	
Signature (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)	
G.F. Hoge	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	_