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SECRETARY OF SEALE

Amend

10-19-11

COVER LETTER

TO: Amendment Section

Division of Corporations	•	
NAME OF CORPORATION:	REALTY SOLUTION	N Pros Inc
DOCUMENT NUMBER:	P0900004	7376
The enclosed Articles of Amenda	nent and fee are submitted for file	ing.
Please return all correspondence	concerning this matter to the follo	owing:
	PATRICE BUL Name of Contact Person	LARD
Re	SOLUTION Firm/Company	Pros Inc
2	295 S. HIAWA	ASSEE ROAD# 201G
	ORLANDO, FL. City/ State and Zip Code	,
E-mail ac		C HOTHAIL ICOM ont notification)
CHARLES Sr Name of Contact Perso	at (<u>56</u>) Area Cod) 929~ 3/98 le & Daytime Telephone Number
Enclosed is a check for the follow	ing amount made payable to the	Florida Department of State:
\$35 Filing Fee \$43.75 Fil Certificate	of Status Certified Cop	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment S Division of Co Clifton Buildi 2661 Executive	Section orporations

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

REALTY COLUTION (Name of Corporation as currently filed with the Florida Dept. of State)

(Danis and N	F 0 70000 4		
(Document Ni	umber of Corporation (if kno	wn)	
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation		lorida Profit Corporation adopts the	follov
A. If amending name, enter the new name	of the corporation:		
		The r	1ew
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or to name must contain the word "chartered," "p	he designation "Corp," "Inc	e," or "Co". A professional corporat	
B. Enter new principal office address, if a	opłicable:		
(Principal office address MUST BE A STRE	<u>SET ADDRESS</u>)	F.S.	
C. Enter new mailing address, if applicab (Mailing address <u>MAY BE A POST OF I</u>	FICE BOX)	TALLAHASSEE. FLORITY	
D. <u>If amending the registered agent and/or</u> new registered agent and/or the new re		n Florida, enter the name of the	
new registered agent and/or the new re-	gistered office address.		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street d	address)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if change I hereby accept the appointment as registered		and accept the obligations of the position	on.
	Signature of New Registere	d 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
DIRECTOR	SMITH CHARLES S	3307 NW 29 Ave Boca BAton FL 33434	Add Remove
			_ □ Add □ Remove
			Add Remove
	lditional sheets, if necessary). (Be speci		
F. If an an	nendment provides for an exchange, rec	elassification, or cancellation of is:	sued shares.
provisio	ons for implementing the amendment if ot applicable, indicate N/A)		

Thè date of each amendment(s	adoption: October 10.2011
Effective date <u>if applicable</u> :	(date of adoption is required) CLODER 12, 20 ((no more than 90 days after amendment file date)
, <u>apprense</u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval
by	voting group)
C	voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
Dated O	1 1 2011
Signature	Alux / I'll
(By a	director, president or other officer - if directors or officers have not been
	ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
appo.	
	charles JMITH
	(Typed or printed name of person signing)
	Director
	(Title of person signing)