## P09600054524

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(Ad	dress)	<del></del>		
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(Do	cument Number)			
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: SKYWATER ESTATES REFERRAL GROUP, INC.					
DOCUMENT NUMBER: P0900054524					
The enclosed Articles of Amendment	and fee are submitted for filing.				
Please return all correspondence conc	rning this matter to the following:				
William Beeche					
<del> </del>	Name of Contact Person				
SKYWA	SKYWATER ESTATES REFERRAL GROUP, INC.				
	Firm/ Company				
2715 E. Oakland Park Blvd, Ste100					
Address					
Fort Lauc	Fort Lauderdale, FL 33306				
	City/ State and Zip Code				
	ergroup.com				
E-mail add	ress: (to be used for future annual report notification)				
For further information concerning this matter, please call:					
William Beeche	at (305 ) 303-3359				
Name of Contact Perso	n Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:					
	iling Fee & Status   Status   Status   Status   Certified Copy   Certified				
Mailing Address Amendment Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	Clifton Building				

## Articles of Amendment to Articles of Incorporation

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## SKYWATER ESTATES REFERRAL GROUP, INC.

TSECRETARY OF STATE
JALLAHASSEE, FLORIDA (Name of Corporation as currently filed with the Florida Dept. of State) P09000054524 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST 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: Name\_of New Registered Agent (Florida street address) New Registered Office Address: 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>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) Change	Р	Dina Dawson Godnick	2715 E. Oakland Park Blvd	
Add			Ste 100	
Remove			Fort Lauderdale FL 33306	
2) Change	D	William E. Beeche	2715 E. Oakland Park Blvd	
Add			Ste 100	
Remove			Fort Lauderdale FL 33306	
3) Change		<del>-</del>		
Add				
Remove				
4) Change				
Add				
Remove			· · · · · · · · · · · · · · · · · · ·	
5) Change				
Add				
Remove				
6) Change			_	
Add				
Remove				

<u>If amending or adding additional Arti</u> (Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
/A	

The date of each amendment(s) adoption: 3/7/2014		
date this document was signed.	, if other than the	
Effective date if applicable:		
(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 3/7/2014 Signature	_	
(By a director, president or other officer—if directors or officers have not been selected, by an incorporator—if in the tands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)		
Dina Dawson Godnick		
(Typed or printed name of person signing)	_	
President		
(Title of person signing)	<del>_</del>	

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SECRETARY OF SIARS