## P0900005455

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200319229562

10/16/18--01020--022 \*\*35.00



OCT 22 2018

## COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Fritz Property Management, 12 DOCUMENT NUMBER: P09000065455
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  Fritz Home Watch Services  Firm/ Company  TO Box 11776  Address  Naples, FL 34108  City/ State and Zip Code  Kati Ofritzhws. Com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Katherine Fritz at (239) 776-8651 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  (Additional copy is enclosed)  Certificate of Status  Certified Copy  (Additional Copy is enclosed)
Mailing Address Amendment Section  Street Address Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

## Articles of Amendme

	Articles of Ame	ndment		.4
	to Articles of Incorp	ooration	19 19 S	gs .
Tritz Proper	tion as currently fi	00 G e M est	of State)	711.4
<u> </u>	55 ment Number of C	orporation (if known)		·
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:		•	dopts the following amendr	ment(s) t
A. If amending name, enter the new name of the of the contain the war and contain the war "Corp.," "Inc.," or Co.," or the designation "Corp., word "chartered," "professional association," or the	ord "corporation," p," "Inc." or "Co	". A professional corpor	The novated" or the abbreviativation name must contain t	on
B. Enter new principal office address, if applicab (Principal office address <u>MUST BE A STREET AD</u>	ole: DDRESS )	N/A		-
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	( <u>OX</u> )	N/A		- -
D. If amending the registered agent and/or regist new registered agent and/or the new registere  Name of New Registered Agent		s in Florida, enter the na	me of the	_
New Registered Office Address:	(Florida street	address)	. Florida	
пен педменей одне лишего.	(C	iţyı	(Zip Code)	-
New Registered Agent's Signature, if changing Relatively accept the appointment as registered agent.	egistered Agent: . I am familiar wit	h and accept the obligatio	ns of the position.	
Sig	gnature of New Reg	istered 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 De	<u>ne</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
<u>X</u> Add	<u>sv</u>	Sally Sr	mith_	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change	<del>.</del>	_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change	-	_		
Add				
Remove				
6) Change				
Add				
Remove				

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, proxisions for implementing the amendment if not contained in the amendment itself.  (if not applicable, indicate N/4)	I amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	
provisions for implementing the amendment if not contained in the amendment itself:			
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The date of each amendment(s) a	doption:	if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date partment of State's records.	te will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amendment(sufficient for approval.	.)
	proved by the shareholders through voting groups. The following statemes each voting group entitled to vote separately on the amendment(s):	મ
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated 10 11	0 8	
Signature	Robert Feat,	
	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other cour	
	ted fiduciary by that fiduciary)	l .
	Robert Fritz	
	(Typed or printed name of person signing)	
	President	

(Title of person signing)