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2025 JUL 24 FOR 3: 13

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPOR	ATION: Bobcat Realty Gro	up, Inc	
DOCUMENT NUMB	~ ~ .		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Daniel Wolk		
•		Name of Contact Persor	1
	Bobeat Realty Group, Inc		
For further information	St Cloud F Uda 4 E-mail address: (to be us	City/ State and Zip Code Cool. Com Sed for future annual report	
Daniel Wolk			624-8390
	f Contact Person	at (321)de & Daytime Telephone Number
Name o	i Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis	ing Address ndment Section tion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as current	ly filed with the Florida Dept	<u>. of State</u>)	
(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this articles of Incorporation:	Florida Profit Corporation ad	opts the following amen	dment(s) to
A. If amending name, enter the new name of the corporation:			
MA		The	new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation no		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	17/17	<u></u>	
		77	-
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C. Enter new mailing address, if applicable:	NIA	21.	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
		<u>ω</u> 	_
	.	্ ত	_
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		ne of the	
Name of New Registered Agent NAME NAME OF NEW REGISTERED AGENT			
(Florida st	reet address)		
New Registered Office Address:		. Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familiar	<u>t:</u>		

Signature of New Registered Agent, if changing

Check if applicable

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	\underline{V}	Mike Jones		
X Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	<u>v</u>	Marcella Melby	4417 13th St #108	
Add			St Cloud FL 34769	
X Remove				
2) Change				
Add				
Remove 3) Change				
Add				
Remove				
4) Change		·		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
	<u> </u>	
		_
	change, reclassification, or cancellation of issued shares. sendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		_
· · · · · · · · · · · · · · · · · · ·	<u> </u>	

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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: (no more than 90 days after	
(no more than 90 days after	amenament jue aate)
Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	ry filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of direaction was not required.	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient	for approval
by	
by(voting group)	
Dated 7/17/2025	
Signature	
(By a director, president or other officer – if direct selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	
	20(K
(Typed or printed name of pers	son signing)
Presiden	
(Title of person signing)	