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(Requestor's Name)			
(Address)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

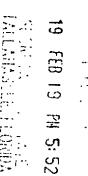




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COVER LETTER

TO: Amendment Section Division of Corpo		-	
NAME OF CORPOR	ATION: Selecti	ve e Uniqu	e Propertes Onc
DOCUMENT NUMB	er: <u>Po</u>	90000929	56.
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	<u> </u>	Disi Cann	210.
		Name of Contact Person	
	Selective e	Unique.	Proportes Que.
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	7961 NW	14 St.	
	0	Address	
	Donaf Ft.	33174.	
		City/ State and Zip Code	:
	E-mail address: (to be us	aru.	20 re
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Sisi	Carnero	at (786	3 4 4 - 7-8 7 4 de & Daytime Telephone Number
	f Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made		
□ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is	☐\$52.50 Filing Fee Certificate of Status Certified Copy

enclosed)

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

(Additional Copy is enclosed)

Articles of Amendment

to

Articles of Incorporation

of

Sélective e Unique Prop	
	ly filed with the Florida Dept. of State)
<u> 1090000</u>	
(Document Number o	f Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation: Hiami top Realtons I name must be distinguishable and contain the word "corporation"	nc. The new
name must be distinguishable and contain the word "corporation" (Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	13775 SW 34 St. Mianu Fl 33175.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13775 SW 345t. Higher Fl 33175.
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address. Name of New Registered Agent	
(Elorido et	reet address)
(Fioriau Si	
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	
Signature of New I	Registered Agent, if changing
	FEB 19 PM
Page 1	014

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>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			 .
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
O. Charan			
4) Change			
Add Remove			
Kemove			
5) Change			
Ađd			+
Remove			
6) Change			
Add			
Remove			

	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
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f an amendment provides for an exprovisions for implementing the an	change, reclassi	fication, or cancel contained in the a	lation of issued she mendment itself:	ares,	
(if not applicable, indicate N/A)					
·					

The date of each amendment(s) adoption:	2/13/2019	, if other than the
date this document was signed.	2-/14/2019	
Effective date if applicable: (no m	nore than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet document's effective date on the Department of State's		this date will not be listed as the
Adoption of Amendment(s) (CHECK C	<u>ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for approva		dment(s)
☐ The amendment(s) was/were approved by the sharel must be separately provided for each voting group		
"The number of votes cast for the amendment	(s) was/were sufficient for approval	
by(voting gro	nunl "	
(voting gro	mp)	
☐ The amendment(s) was/were adopted by the board of action was not required.	of directors without shareholder action and sha	areholder
☐ The amendment(s) was/were adopted by the incorporaction was not required.	orators without shareholder action and shareho	older
Dated	} 	
Signature		
	r other officer - if directors or officers have no	ot been
selected, by an incorporate	or - if in the hands of a receiver, trustee, or other	
appointed fiduciary by tha	at fiduciary)	
5	isi CARNERO.	
(Typed	or printed name of person signing)	
·	President.	
	(Title of person signing)	