P09000102029

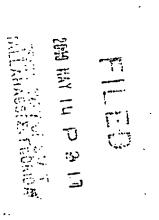
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: MOUNT DORAR	EALTY GROUP INC
DOCUMENT NUMBER: P09000102029	
The enclosed Articles of Amendment and fee are s	ubmitted for fiting.
Please return all correspondence concerning this m	atter to the following:
ALICIA DAWN WILLIAMS	
	Name of Contact Person
	Firm/ Company
923 N BAKER STREET	
	Address
MOUNT DORA, FL 32757	
	City/ State and Zip Code
DAWN@CALLDAWNWILLIAMS.C	сом
E-mail address: (to be t	ised for future annual report notification)
For further information concerning this matter, plea	use call:
DAWN WILLIAMS	at (352 250-3025
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 \$\sum \text{\$\sum \$\\$43.75 Filing Fee & Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is 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

Articles of Amendment to Articles of Incorporation of

	of		***
MOUNT DORA REALTY GROUP, INC			FILED
(<u>Name</u>	of Corporation as currently i	iled with the Florida D	ept. of State)
P09000102029			FIS Q DI YAH BIOS
	(Document Number of C	orporation (if known)	SEPTIME TO SERVICE AND ALL
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this Fl	orida Profit Corporation	r adopts the fullowing anichdinefit(s) to
A. If amending name, enter the new n	ame of the corporation;		
1			The new
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the design word "chartered," "professional association	nation "Corp," "Inc," or "Co	". A professional corp	rporated" or the abbreviation
B. Enter new principal office address (Principal office address MUST BE A.S.)			
		 	
C. Enter new mailing address, if app (Mailing address MAY BE A POST			
	·		
D. If amending the registered agent a new registered agent and/or the ne		s in Florida, enter the r	name of the
Name of New Registered Agent			
	(Florida stree	(address)	
New Registered Office Address:			. Florida
ren negareta ome rantes.		ity)	(Zip Code)
Name Danistanad Amantlu Sinnatura if	hamaina Danistana I Alama		
New Registered Agent's Signature, if of thereby accept the appointment as regis		h and accept the obligat	ions of the position.
			•
			
	Signature of New Reg	sistered Agent, if changir	18

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	PT John Doe		
X Remove	V Mile Jones		
X Add	SV Sally Smith	l.	
Type of Action (Check One)	<u>Title</u> Na	ame	<u>Addres</u> s
1) Change	V AI	LICIA DAWN WILLIAMS	923 N BAKER STREET
Add			MOUNT DORA, FL 32757
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove	(°		
6) Change			-
Add			
Remove			

If amending or adding additional A	rticles, enter change(s) here:
(Attach additional sheets, if necessary	
<u> </u>	
If an amandment provides for an a	schange, reclassification, or cancellation of issued shares,
provisions for implementing the ar	mendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
····	

The date of each amendment	-	APRIL 1, 2019 tion:	, if other than the
date this document was signed		1.2010	
Effective date if applicable:	APRIL	1, 2019	
		(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t		k does not meet the applicable statutory filing requirements, this date tment of State's records.	will not be listed as the
Adoption of Amendment(s)		(<u>CHECK ONE</u>)	
☑ The amendment(s) was/weby the shareholders was/w		d by the shareholders. The number of votes east for the amendment(s) lent for approval.	
		 ped by the shareholders through voting groups. The following statement th voting group entitled to vote separately on the amendment(s): 	1
"The number of votes	s cast for	the amendment(s) was/were sufficient for approval	
by		(voting group)	
☐ The amendment(s) was/we action was not required.	re adopte	by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/we action was not required.	re adopt	by the incorporators without shareholder action and shareholder	
05/08 Dated	3/2019		
Signature _	a	Icia Daun William	
(E	elected, l	ctor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary)	
	А	LIÇIA DAWN WILLIAMS	
		(Typed or printed name of person signing)	
	٧		
		(Title of person signing)	