# P10000008933

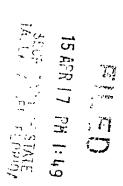
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### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: STARFISH REALTY, INC.

DOCUMENT NUMBER: P10000008933

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

## **MELISSA FLOYD**

Name of Contact Person

Firm/ Company

189 TOPANGA DRIVE

Address

BONITA SPRINGS, FL 34134

City/ State and Zip Code

## MELISSA.FLOYD@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HERBERT J. BUCK

239

514-4244

Name of Contact Person

Area Code & Daytime Telephone Numbe

Enclosed is a check for the following amount made payable to the Florida Department of State:

■ \$35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status

□\$43.75 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

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Articles of Amendment	ر الماريخ الم الماريخ الماريخ الماري	<u>_</u>	
to	T &	3>r	
Articles of Incorporation of	•	- By - 羅	ÿ
STARFISH REALTY, INC.	· · · · · · · · · · · · · · · · · · ·	1830	er in
(Name of Corporation as currently filed with the Florida Dept.	of State)	- <u> </u>	è
	or state)		Ē.
P10000008933	٠٠ / / . المناس (ت		ÿ
(Document Number of Corporation (if known)	7) 427	£	
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>Florida Prof</i> eits Articles of Incorporation:	it Corporation adopts the followi	ng amendment	(s) to
A. If amending name, enter the new name of the corporation:			
WATERSIDE REALTY GROUP, INC.		The new	
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A project 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)	fessional corporation name must	contain the —	
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 Florid new registered agent and/or the new registered office address:	la, enter the name of the		
Name of New Registered Agent	<u> </u>		
	<u>.                                    </u>		
(Florida street address)			
New Registered Office Address:	Florida		
(City)	(Zip Code)	_	
	-		
Now Designated Association (Company of the Company			
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and acce	nt the obligations of the north-		
Thereby decept the appointment as regimered agent. I am juintair with and acce	pi me ovuganons oj ine position.		
Signature of New Registered Agent, if chan	ging		

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 <math>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	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<del></del>		
Add Remove			
2) Change			
Add Remove			
3) Change		<u> </u>	
Add Remove			
4) Change			
Add Remove			
5) Change	_		
Add			
Remove			
6) Change			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	<del></del>
11000000	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
<u> </u>	

The date of each amendment(s) adoption: APRIL 12, 2015	if other than the
date this document was signed.	_
Effective date if applicable:	<del></del>
(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 east 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 APRIL 12, 2015	
Signature / //	_
(By a director, president of other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
MELISSA FLOYD	
(Typed or printed name of person signing)	_
President	
(Title of person signing)	<del></del>