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JUL 18 2017 S. YOUNG 17 JUL 13 RN 3:30

COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: MIAMI BEACH INVESTMENT RECITY, IN DOCUMENT NUMBER: P 100000 20636			
The enclosed Articles of Amendment and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Romina Tripichio Name of Contact Person Miami Beach Tovestment Realty Inc Firm/ Company 5600 Collins Ave 16 V Address MIAMI BEACH FL 33140 City/ State and Zip Code ANA CMBINRE COM E-mail address: (To be used for future annual report notification)			
For further information concerning this matter, please call:			
Romine Tripichio at 786, 597-9338 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:			
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) 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

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MIAMI BEACH TOVEST MENT KEZITY, INC	,
(Name of Corporation as currently filed with the Florida Dept. of State)	
P 100000 20636	
(Document Number of Corporation (if known)	
·	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amend its Articles of Incorporation:	ment(s) to
·	
A. If amending name, enter the new name of the corporation:	
The r	
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviat "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
	_
	_
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	_
	7
<u></u> _ <u>\</u>	- (Y)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the	
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: , Florida ,	_
(City) (Zıp Code)	
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Signature of New Registered 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	PT John Do	<u>ne</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	<u>ones</u>	
X Add	SV Sally Si		
Type of Action (Check One) 1) Change	Secretary	Romina Tripich	Address 10 5600 COLLINS AVE APT 16 V MIAMI BRACH, F1 3314
Add			MIAMI BEACH, F13314
2) Change			
Add			
3) Change			
Add			
4) Change			
Remove			
5) Change			
Add Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) he (Be specific)			
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f an amendment provides for an exc	hange, reclassification,	or cancellation of i	ssued shares.	
provisions for implementing the ame	endment if not containe	d in the amendmen	t itself:	
(if not applicable, indicate N/A)				
			<u></u>	 -
				<u></u> _
				

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 aft	er amendment file date)
Note: If the date inserted in this block does not meet the applicable state document's effective date on the Department of State's records.	story filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of by the shareholders was/were sufficient for approval.	of votes cast 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 separately.	
"The number of votes cast for the amendment(s) was/were sufficie	nt for approval
by(voting group)	<u> </u>
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without s action was not required.	hareholder action and shareholder
□ The amendment(s) was/were adopted by the incorporators without share action was not required.	holder action and shareholder
Dated 7/10/2017	
Signature	
(By a director, president or other officer - if di selected, by an incorporator - if in the hands o	
appointed fiduciary by that fiduciary)	Lareceiver, mixice, or other court
ANA & 1	EVV
(Typed or printed name of p	erson signing)
	5 5
TRESID	TUS
(Title of person	signing)