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(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
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(Do	ocument Number)	)
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## **COVER LETTER**

TO: Amendment Section Division of Corporations

	RATION: SIGNATUR BER: P1000002121		<u>).</u>		
	of Amendment and fee are sul				
	pondence concerning this mat	-			
	MARIANNE MILA	KOVIC			
		Name of Contact Person			
	SIGNATURE REA		•		
		Firm/ Company			
	7401 WILES RD.	SUITE 236			
		Address			
	<b>CORAL SPRING</b>	S, FL 33067			
		City/ State and Zip Code	<u> </u>		
MILAKOVIC62@YAHOO.COM  E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
MARIANNE I	MILAKOVIC	at (954	, 254-7800		
MARIANNE MILAKOVIC  Name of Contact Person  at (954)  Area Code & Daytime Telephone Nu			de & Daytime Telephone Number		
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)		
Ame	ling Address indment Section sion of Corporations	Amend	Address ment Section n of Corporations		

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

FILED.

SIGNATURE REALTY, IN	IC.		: 1 -2014-OCT   4 PM   1:	22
(Name of Corporation as c P10000021211	urrently filed with the I	Florida Dept. of State	STUREYARY OF STA	ATE RIDA
	Number of Corporation (	if known)	10 A TANGETON	
Pursuant to the provisions of section 607.10 ts Articles of Incorporation:	06, Florida Statutes, this	Florida Profit Corpor	ation adopts the following amenda	ment(s)
A. If amending name, enter the new nam	e of the corporation:			
name must be distinguishable and contai "Corp" "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Inc," or '	'Co". A professional	The ne 'incorporated'' or the abbreviation corporation name must contain to	on
B. Enter new principal office address, if	7401 WILE		RD., SUITE 242	
(Principal office address <u>MUST BE A STI</u>		CORAL SPE	RINGS, FL 33067	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7401 WILES	RD., SUITE 242	
		CORAL SPE	RINGS, FL 33067	
D. If amending the registered agent and/ new registered agent and/or the new			the name of the	
Name of New Registered Agent	MARIANNE MIL	AKOVIC	<u> </u>	
•	7401 WILES R	D., SUITE 24.	2	
		reet address)		
New Registered Office Address:	CORAL SPRIN	<u>GS</u>	Florida 33067	
	(City,	)	(Zip Code)	

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	<u>PT</u>	John Doe	
	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	Р	MARIANNE MILAKOVIC	7401 WILES RD., SUITE 2412
Add			CORAL SPRINGS, FL 3306 7
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)	6.13 200 - 1	
<u> </u>			
			-1
			····
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If an amendment provides for an exch	ange, reclassification, or ca	ncellation of issued shares.	
provisions for implementing the ame	ndment if not contained in t	he amendment itself:	
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)	<del></del>		
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			
(if not applicable, indicate N/A)			

date this document was signed.	Raoption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were acby the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	opproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated OCT. 1	10, 2014	
; (By a select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	_
	MARIANNE MILAKOVIC	
	(Typed or printed name of person signing)	_
	PRESIDENT	
	(Title of person signing)	<del></del>