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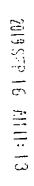
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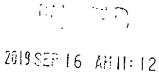
TO: Amendment Section Division of Corporations

NAME OF CORPORATION: FISCHER REALT	Y INC.	
DOCUMENT NUMBER: P10000025511		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this made	tter to the following:	
JAMES C FISCHER		
<del></del>	Name of Contact Person	1
FISCHER REALTY INC.		
	Firm/ Company	
13031 MCGREGOR BLVD.		
	Address	_
FORT MYERS, FLORIDA 3	3919	
	City/ State and Zip Code	2
ЛМ@ЛМFISCHERREALTOR.CO	DM .	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
JAMES C FISCHER	at ( <u>239</u>	349 6108
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	☐\$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

Street Address
Amendment Section Division of Corporations Clifton Building

## Articles of Amendment to Articles of Incorporation of



FISCHER REALTY INC.		
(Name of Corporation	as currently filed with th	
P10000025511		, .
(Docume	nt Number of Corporation (	if known)
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit	Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	poration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the al	"Inc," or "Co". A profes	" or "incorporated" or the abbreviation ssional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDR	<u></u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		enter the name of the
Name of New Registered Agent		
	(Florida street address)	
N 2 1060 11	The same and same same	
New Registered Office Address:	(City)	, Florida
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I de-	tered Agent:	the obligations of the position
печену иссерств арронитель аз registerea agent. Та	ıт jamınar wun ana accept	те опаданотѕ ој те 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	<u> 14</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
$X \wedge dd$	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	V	SUSAN P BENNETT	13031 MCGREGOR BLVD.
X Add			FORT MYERS, FL 33919
Remove			
2) Change	D	BARBARA M WATT	13031 MCGREGOR BLVD.
X Add			FORT MYERS, FL 33919
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional (Attach additional sheets, if necess	sary). (Be specific)	<del></del>		
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If an amondment and I af	1 1 10	11		
If an amendment provides for an provisions for implementing the	e amendment if not contain	or cancellation of issued	i snares,	
(if not applicable, indicate N	7A)	ea in the amenament rise	<u></u>	
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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 after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, document's effective date on the Department of State's records.	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 votes cast for the amen by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"The number of votes east 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 sha action was not required.	treholder
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	lder
Dated	
Signature C	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other	
appointed fiduciary by that fiduciary)	ici court
JAMES C. FISCHS	-L.
(Typed or printed name of person signing)	
MESICAMIT	
(Title of person signing)	