

P10000025586



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Amend

FILED
11 AUG 30 AM 8:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment
Division of Corporations

NAME OF CORPORATION: Fortress Real Estate, Inc

DOCUMENT NUMBER: P10000025586

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

Please return all correspondence concerning this matter to the following:

Michael J. Kramer

Name of Contact Person

Fortress Real Estate, Inc.

Firm/ Company

8586 Juniper Road

Address

Ocala/FL. 34480

City/ State and Zip Code

fortressreinc@gmail.com

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

For further information concerning this matter, please call:

Michael J. Kramer

Name of Contact Person

at (352)

812-5113
Area Code & 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)

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

Fortress Real Estate, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

P10000025586

(Document Number of Corporation (if known))

Efficient
9-1-11

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the 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)

1028 E. Silver Springs Blvd.

Ocala, FL. 34470

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

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TALLAHASSEE, FLORIDA

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: Margaret V. Kramer

New Registered Office Address: 2425 SW 3RD Ave Lot 79
(Florida street address)

Ocala, FL. Florida 34471
(City) (Zip 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.

Margaret V. Kramer

Signature of New Registered Agent, if changing

Title

Name

Address

Add

D

Margaret V. Kramer

remove

2425 SW 3RD AVE

Lot 79

Ocala, FL. 34471

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
D	June A. Braccia	8586 Juniper Rd. Ocala, FL, 34480	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
RA	June A. Braccia	8586 Juniper Rd. Ocala, FL, 34480	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
RA	Margaret V. Kramer	2425 SW 3RD Ave Lot 79 Ocala, FL, 34471	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

I wish to remove June A. Braccia as a Director.

I wish to remove June A. Braccia as a Registered Agent.

I wish to add Margaret V. Kramer as a Registered Agent.

I wish to add Margaret V. Kramer as a Director

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

I wish to cancel all shares to Director June A. Braccia.

The date of each amendment(s) adoption: August 29, 2011

Effective date if applicable: September 1, 2011 (date of adoption is required)
(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 cast 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 August 29, 2011

Signature Michael J. Kramer

(By a director, president or 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)

Michael J, Kramer
(Typed or printed name of person signing)

President
(Title of person signing)