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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	SOWEN REALTY INC.
DOCUMENT NUMBER:P 100	X0062193
The enclosed Articles of Amendment an	d fee are submitted for filing.
Please return all correspondence concern	ning this matter to the following:
DARELL	BOYNEN
	Name of Contact Person
	Firm/ Company
12669	HEADWATER WAY Address
and the second of the second	Address W FL 33 YI Y City/ State and Zip Code
	City/ State and Zip Code it iven a ketick product. Com. o be used for future annual report notification)
For further information concerning this n	natter, please call:
DARELL BOWEN Name of Contact Person	at (56/) 346 - 3622 Area Code & Daytime Telephone Number
Enclosed is a check for the following am	ount made payable to the Florida Department of State:
\$35 Filing Fee Sectificate of Statu	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ROWEN REAL	THE INC	
Bo ωΕλ REAL (Name of Corporation as curre	ently filed with the Floric	da Dept. of State)
P 1 00000 621		30 A. J.
	ber of Corporation (if kno	own)
uant to the provisions of section 607.1000 andment(s) to its Articles of Incorporation:	5, Florida Statutes, this F	Florida Profit Corporation adopts the follo
f amending name, enter the new name of	the corporation:	
BODIS REALTY	INC.	The new 'company," or "incorporated" or the
e must be distinguishable and contáin t eviation "Corp.," "Inc.," or Co.," or the e must contain the word "chartered," "proj	designation "Corp," "Ind	c," or "Co". A professional corporation
nter new principal office address, if applicipal office address <u>MUST BE A STREE</u>		
Enter new mailing address, if applicable:	1	
Mailing address <u>MAY BE A POST OFFIC</u>	CE BOX)	
f amending the registered agent and/or r		in Florida, enter the name of the
ew registered agent and/or the new regis	stered office address:	·
Name of New Registered Agent:		
New Registered Office Address:	(Florida street d	address)
_		, Florida
	(City)	(Zip Code)
Registered Agent's Signature, if changing	ng Registered Agent:	
eby accept the appointment as registered as	gent. I am familiar with a	and accept the obligations of the position.
	ignature of New Registere	ed 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)

Title .		Name	Address	Type of Action
	-			Add Remove
	-			
				Remove
•	-			☐ Add ☐ Remove
		tional sheets, if necessary). (Be specifi		
<u>pro</u>	<u>visions</u>	ndment provides for an exchange, reclassion for implementing the amendment if napplicable, indicate N/A)	assification, or cancellation of iss ot contained in the amendment i	ued shares, tself:

The date of each amendment(s) adoption:(date of adoption is required)	
	_
Effective date if applicable: (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 by the shareholders was/were sufficient for approval.	nt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ement
"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.	older
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	,
Dated / 0 / 20 / 10	
Signature	
(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 courappointed fiduciary by that fiduciary)	
DARELL BOWEN	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	