## P10000071990

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TALLAHASSEFFE

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### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: 9 CORE REALT	Y INC		
DOCUMENT NUMB	P10000071990		**********	
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	DAWN STECKELBERG			
<del>-</del>		Name of Contact Person	1	
	9 CORE REALTY INC			
-		Firm/ Company	<del></del>	
	2180 W FIRST ST # 302			
-	· · ·	Address		
FORT MYERS FL 33901				
-	. <del>.</del>	City/ State and Zip Code	;	
	DAWN@LANDWEALTH.C	СОМ		
-	E-mail address: (to be us	sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
DAWN STECKELBERG		at ( <sup>239</sup>	541-8448	
Name of Contact Person			Je & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

#### Articles of Amendment to Articles of Incorporation of

# 7022 AUG 23 PH 3: 00

9 CORE REALTY INC

	of Corporation as current	ly filed with the Florida Dept. of State)
P10000071990	(Doggested Northern	(Committee (Classes)
	(Document Number o	of Corporation (if known)
fursuant to the provisions of section 607 section 607 sections of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendmen
a. If amending name, enter the new n	ame of the corporation:	
NA		The new
ame must be distinguishable and contain 'Inc.,' or Co.," or the designation "C 'chartered," "professional association,"	Corp," "Inc," or "Co".	'company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
Enter new principal office address	if applicable	NA
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)		
. Unto a now malling address if and	:bl	
Enter new mailing address, if appl (Mailing address MAY BE A POST		NA
	<del></del>	
). If amending the registered agent ar	id/or registered office ado	lress in Florida, enter the name of the
new registered agent and/or the ne		
Name of New Registered Agent	NΛ	
	(Florida st	reet address)
New Registered Office Address:	NA	17. 11
New Neglsterea Office Address		(City) (Zip Code)
ew Registered Agent's Signature, if c		
nereny accept the appointment as regist	tered agent. I am familiar	with and accept the obligations of the position.
	Signature of New I	Registered Agent, if changing

#### Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	D	JUSTUS KOESTER	PO BOX 2569
Add			FORT MYERS FL 33902
X Remove			
2) Change	D	CHANDLER JANGER	PO BOX 2569
X Add			FORT MYERS FL 33902
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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f an amendment provides for an excha	nge, reclassification, or cancellation of issued shares.
(if not applicable, indicate N/A)	dment if not contained in the amendment itself:

The date of each amendment(s) adoption:	_, if other than th
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, this date will redocument's effective date on the Department of State's records.	not be listed as th
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	hareholder
☐ 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 $\frac{\partial^2}{\partial s}$	€     <u>                                 </u>
by	
(voting group)	O = 1.
8-17-2022 Sys	3 문
Dated	ယ္ 🛡
Signature	 _ 00
(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)	- 0
DANIEL BARRES	
(Typed or printed name of person signing)	<del></del>
CEO	
(Title of person signing)	