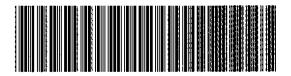
P10000089984

(R	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate:	s of Status
		
Special Instructions to	Filing Officer:	
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Manuch 8
(12/21/10)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION:	ATION: 1 VISION MIAMI REALTY INC		
DOCUMENT NU	MBER:	T		
	les of Amendment and fee a			
Please return all co	rrespondence concerning th	is matter to the following:		
	E. A	DRIAN MORLANNE		
·	N	lame of Contact Person		
-		Firm/ Company		
; -	1230 E 4TH AVE			
	.;	Address		
1.36D)	• · · · · · · · · · · · · · · · · · · ·			
ĝ.		IALEAH, FL 33010		
	C	City/ State and Zip Code		
	BADA E-mail address: (to be use	AD@MSN.COM ad for future annual report notification)		
For further informa	ation concerning this matter,	please call:		
FΔD	RIAN MORLANNE	at (786) 3	; 60-3004	
	of Contact Person	Area Code & Daytime Te		
		nade payable to the Florida Depar		
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section		Street Address Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327			Clifton Building	
Tallahassee, FL 32314		2661 Executive Center Circ. Tallahassee, FL 32301	ie –	



RECEIVED

10 DEC 20 PM 3: 51

FLORIDA DEPARTMENT OF STATE SECRETARY OF STATE

TALLAHASSEE, FLORIDA

November 29, 2010

E. ADRIAN MORLANNE 1230 E 4TH AVE HIALEAH, FL 33010

SUBJECT: 1 VISION MIAMI REALTY, INC

Ref. Number: P10000089984

We have received your document for 1 VISION MIAMI REALTY, INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

You failed to sign the document and you are required to submit a letter or affidavit stating that you do not intend on reinstating document number P09000059253 - ONE VISION MIAMI REALTY, INC. since you appear to be the same people trying to use the name of a administratively dissolved corporation dissolved on 9/24/2010 whose name is not available.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 710A00027645

December 16, 2010

Florida Department of State Division of Corporation PO Box 6327 Tallahassee, FL 32314

Subject: One Vision Miami Realty, Inc

Ref Number: P09000059253

We do not indent on reinstating document number P09000059253 - ONE VISION MIAMI, REALTY, INC.

President.

Articles of Amendment Articles of Incorporation

of

1 VISION MIAMI REALTY INC

(Name of Corporation as curre	ently filed with the Florid	ia Dept. of State)
P10	000089984	
(Document Num	nber of Corporation (if kno	own)
cursuant to the provisions of section 607.1006 mendment(s) to its Articles of Incorporation:	6, Florida Statutes, this F	Clorida Profit Corporation adopts the
a. If amending name, enter the new name of	f the corporation:	
ONE VISION	MIAMI REALTY INC	The
ame must be distinguishable and contain t bbreviation "Corp.," "Inc.," or Co.," or the ame must contain the word "chartered," "proj	designation "Corp," "Inc	c," or "Co". A professional corpord
8. Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		
. If amending the registered agent and/or r	registered office address i	n Florida, enter the name of the
new registered agent and/or the new regis		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street d	address)
		, Florida
	(City)	(Zip Code)
lew Registered Agent's Signature, if changin	na Registered Agent:	
hereby accept the appointment as registered a		and accept the obligations of the posit
	ignature of New Pagietare	A America of the construction

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
-			П п
			☐ Add ☐ Remove
E Ifamand	ing ou odding oddisional Ausialae ausa	n shanga(s) hara	
	ing or adding additional Articles, enter ditional sheets, if necessary). (Be spec		
·			
provisio	endment provides for an exchange, rens for implementing the amendment in applicable, indicate N/A)		
······································			

The date of each amendmen	t(s) adoption: 11	1/16/2010
Effective date <u>if applicable</u> :	11/16/2010	(date of adoption is required)
	(no more than S	90 days after amendment file date)
Adoption of Amendment(s)	(<u>C</u> H	HECK ONE)
The amendment(s) was/we by the shareholders was/w		e shareholders. The number of votes cast for the amendment(s) approval.
	, ,	ne shareholders through voting groups. The following statemer group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amen	ndment(s) was/were sufficient for approval
by		. 17
	(voting group)	
action was not required.	·	board of directors without shareholder action and shareholder
✓ The amendment(s) was/we action was not required.	ere adopted by the	incorporators without shareholder action and shareholder
Dated_11/1 Signature	6/2010 M/4.2	Inales
(B)		dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
		MARIA ROSALES
	(Ту	ped or printed name of person signing)
		PRESIDENT
	(Title o	f person signing)