## P10 0000095338

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Orlando REO Prot	essionals 1, Inc.			
	1BER: P10000095338				
The enclosed Article	es of Amendment and fee are so	ibmitted for filing.			
Please return all cor	respondence concerning this ma	atter to the following:			
	Joel Cutter				
		Name of Contact Person	n		
	Orlando REO Professionals 1, Inc.				
	Firm/ Company				
	8017 13th Avenue South				
		Address			
	St. Petersburg, Florida 33707	;			
		City/ State and Zip Cod	e		
	JoelCutler@msn.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informat Joel Cutter	on concerning this matter, plea	se call:at (41)7	474-9066		
Name of Contact Person		at ( Area Co	) de & Daytime Telephone Number		
	for the following amount made				
S35 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		Amend Divisio The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303		

## Articles of Amendment 10 Articles of Incorporation

ORLANDO REO PROFESSIONALS LINC.

	<u>Hly filed with the Flor</u>	ida Dept. of State)
P10000095338		
(Document Number	of Corporation (if kno	wn)
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corpo	ration adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
NA		The new
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corpo	orated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable:	NA	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	NA	20:
	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
	NA	3 0
	NA	- 0
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address		the name of the
Name of New Registered Agent Joel Q. Cutler		
8017 13th Avenue South		
tFlorida s	street address)	<del></del>
New Registered Office Address: St. Petersburg		, Florida <sup>33707</sup>
HER HERBITTER OFFICE THRITESS.		(Zip Code)

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> <u>John</u>	1 Doe				
X Remove	<u>V</u> <u>Mike</u>	Mike Jones				
X Add	<u>SV</u> <u>Sally</u>	Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change	V	Tara Vicente	3565 TABB DRIVE			
Add			Deltona, Florida			
x Remove			32738			
2) Change	<u>v</u>	Sarina Kuczynski	1901 N. LEAVITT AVENUE			
X Add			Orange City, Florida			
	T	Leaf Code	32763			
Remove 3 ) Change		Joel Cutler	PO Box 950103			
Add			Lake Mary, Florida			
X Remove			32795-0103			
4) X Change	P.CEO.C	Joel Cutler	8017 13th Avenue South			
Add			St. Petersburg, Florida			
Remove			33707			
5) Change						
Add						
Remove						
6) Change	<u></u>	<del></del>				
Add			***			
Remove						

(Attach	nding or adding addi additional sheets, if n	ecessary). (Be spec	cific)			
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If an a	mendment provides (	or an exchange, rec	lassification, or ca	incellation of issue	d shares,	
<u>provis</u> (i)	sio <mark>ns for implementir</mark> I not applicable, indica	ig the amendment if ue NZ4)	'not contained in	the amendment its	<u>self:</u>	
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	4/10/2020	
The date of each amendment(s) ad date this document was signed.	option:	, it other than the
4/10/	2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file do	<del></del>
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirem sartment of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes cast for the ficient for approval,	imendment(s)
	oved by the shareholders through voting groups. The follouch voting group entitled to vote separately on the amenda	
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
selegied	ector, president or other officer – if directors or officers har by an incorporator – if in the hands of a receiver, trustee, of d fiduciary by that fiduciary)	
]	oel Cutler	
	(Typed or printed name of person signing)	
(	ΈO	
-	(Title of person signing)	

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