P100000097543

(Requestor's Name)	_
(Address)	_
(Address)	_
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
Certified Copies Certificates of Status	_
	_
Special Instructions to Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	RNATIONAL REALTY, I	NC.			
	UMBER: P10000097543					
	cles of Amendment and fee are su	bmitted for filing.				
Please return all c	orrespondence concerning this ma	tter to the following:				
	Angela Manaslay					
	<u> </u>	Name of Contact Person	1			
	Law Offices Michael H Meri	no P.A.				
		Firm/ Company				
6741 Orange Dr						
	·	Address				
	Davie, FL 33314					
		City/ State and Zip Cod	e			
	angela@prioritytitle.net					
	* '*'	sed for future annual report	notification)			
For further inform	nation concerning this matter, plea		321-7701			
No	ame of Contact Person	at (954) 321-7701 Area Code & Daytime Telephone Number				
Enclosed is a chec	ck for the following amount made	payable to the Florida Depa	artment of State:			
S35 Faling Fe	ee □\$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

	of Corporation as currently	filed with the Florida Dept	. of State)		
10000097543					
	(Document Number of	Corporation (if known)			
tursuant to the provisions of section 607 as Articles of Incorporation:	,1006, Florida Statutes, this F	<i>lorida Profit Corporation</i> ad	opts the following am	endme	
. If amending name, enter the new n	ame of the corporation:				
			Th_{t}	nen	
ame must be distinguishable and contain Inc.," or Co.," or the designation "C chartered," "professional association,"	Corp," "Inc," or "Co", A	ompany," or "incorporated" (professional corporation no	or the abbreviation "C	orp., "	
5. Enter new principal office address, Principal office address <u>MUST BE A S</u>		11555 Heron Bay Blvd, Co	oral Springs, FL 33076	·	
. Enter new mailing address, if appl		11555 Heron Bay Blvd, Ce	oral Springs - EL 33076		
(Mailing address MAY BE A POST	OFFICE BOX)	Treat Helding Fred, Colai Springs, 12 2- 070			
					
. If amending the registered agent at	nd/or registered office addro	ess in Florida, enter the nan	ne of the	1	
new registered agent and/or the ne	w registered office address:			շորդրում 2	
Name of New Registered Agent				hεί	
	11555 Heron Bay Blvd			~	
	tFlorida stree	rt address)		-13	
			33076		
New Registered Office Address;	Coral Springs		, Florida	Pii 1	
New Registered Office Address:		City)	, Fiorida	15 15 35	
New Registered Office Address:				75: 75: 33	
iew Registered Agent's Signature, if c	changing Registered Agent:	City)	(Zip Code)	H 9: 33	
Sew Registered Agent's Signature, if c	changing Registered Agent:	City)	(Zip Code)	H p: 33	
Sew Registered Agent's Signature, if c	changing Registered Agent:	City)	(Zip Code)	h p: 33	
New Registered Office Address: Sew Registered Agent's Signature, if a hereby accept the appointment as regis	changing Registered Agent:	City)	(Zip Code)	A p: 33	

Check if applicable

 \square 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.

X Change	PT John	Doc		
X Remove	<u>V</u> <u>Mike</u>	e Jones		
<u>X</u> Add	<u>SV</u> <u>Sally</u>	y Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change	<u>p</u>	GIOVANNI FECGOSSI	11555 Heron Buy BIND	
Add			cosal 585, 195, FL 33070	<u>_</u>
Remove				
2) Change				
Add				
Remove 3.) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5/ Change				
Add				
Remove				
6) Change				
Add				
Remove				

(Attach additi	ional sheet.	s, if necessary	9. (Bc sp	recific)				
Change	PSI	C51211	r A	22185	5	+0	11555	Heson
Bay B	ivd	C0861	5811	195, F	L	330	16	Heson
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		ides for an e					of issued shares,	
		indicate N/A		t it not coma	amed in t	ne amena	ment usen:	
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E. If amending or adding additional Articles, enter change(s) here:

	doption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the D	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
Let The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareholder acti	ion and shareholder
☐ The amendment(s) was/were adby the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment afficient for approval.	(s)
	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selecte	irector, president or other officer - if directors or officers have not been d, by an incorporator - if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary) Grandi Ferral (Typed or printed name of person signing) Tesident (Title of person signing)	