P11000024525

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	<u></u>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FLORIC)A and Title E	SCROW PROFESSIONALS,		
DOCUMENT NUMBER: P1100	0024525	<u> </u>		
The enclosed Articles of Amendment and fee are s	ubmitted for filing.			
Please return all correspondence concerning this m	atter to the following:			
STE	NEW CHARY			
	Name of Contact Person	1		
1900 Sunset	HARBOUR DRIV	Professionals, Inc.		
MIAMI BEACH	FL 33139 City/ State and Zip Code			
,	City/ State and Zip Code	e		
	,			
E-mail address: (to be a	used for future annual report	notification)		
		•		
For further information concerning this matter, plea	ase call:	•		
Steven Chaba	305	532-1400		
Name of Connect Person	Area Co	de & Daytime Telephone Number		
England in a sheet factor following an arm and				
Enclosed is a check for the following amount made	e payable to the Florida Depa	iriment of State:		
\$35 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		Address		
Amendment Section		Iment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
Tallahassee, FL 32314		Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

P11000024525

(Docum	nent Number of	Corporation (if knowr	1)	
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this I	Florida Profit Corpord	ution adopts the fol	lowing amendment
A. If amending name, enter the new name of the co	orporation:			•
	,			The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp word "chartered," "professional association," or the	," "Inc," or "(Co". A professional		
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>		<u> </u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X</u>)			
		<u> </u>		
D. If amending the registered agent and/or registenew registered agent and/or the new registered			the name of the	
Name of New Registered Agent				
	(Florida stro	eet address)		
New Registered Office Address:			', Florida	
Terrate of the same of the sam		(City)	,	(Zip Code)
New Registered Agent's Signature, if changing Reg				
I hereby accept the appointment as registered agent.	I am familiar v	ith and accept the ob	igations of the pos	ition.
Sign	nature of New R	egistered Agent, if cha	inging	

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	<u>v</u>	Mike Jones	·
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	D	ANDREW BALDOH	1900 SUNSET HARBOUR DRIVE
Add Remove			MIAMI BEACH, FL 33139
2) Change	 .		
Add		·	
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			-
Remove			
6) Change			
Add			
Remove			

	sary). (Be specifi	thange(s) here: (c)		
	<u> </u>			······································
				<u> </u>
				
		 		
lf an amendment provides for a	in exchange recla	ssification, or cancel	lation of issued shares	
	ie amendment if n	ot contained in the a	mendment itself:	•
provisions for implementing th	177.45			
provisions for implementing the	V/A)			
provisions for implementing th	N/A)			
provisions for implementing th	V/A)			
provisions for implementing th	V/A)			
provisions for implementing th	V/A)			
provisions for implementing th	V/A)			
provisions for implementing th	V/A)			
provisions for implementing th	V/A)			

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
(no more than 90 days after a	amendment file date)
Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	y filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of v by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without share action was not required.	eholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	der action and shareholder
Dated	
(By a director, president or other officer of direct selected, by an incorporator – if in the hands of a rappointed fiduciary by that fiduciary)	
PHILIP GROSS	
(Typed or printed name of person	on signing)
PRESIDENT	
(Title of person sign	ning)

** * . .