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(Doc	ument Number)	
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Greater	Tampa Appraisal, I	nc
DOCUMENT NUMBER:		
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning thi	is matter to the following:	
Paul Melikian		
	Name of Contact Person	
Greater Tampa	a Appraisal,Inc	
	Firm/ Company	
2103 W Marjor	ry Ave	
	Address	
Tampa, FL 33		
	City/ State and Zip Code	
pmelikian@hotma	il.com	
	be used for future annual report	notification)
For further information concerning this matter,	please call:	
Paul Melikian	_{at (} 813	928-6231
Name of Contact Person		le & Daytime Telephone Number
Enclosed is a check for the following amount m	ade payable to the Florida Depa	rtment of State:
\$35 Filing Fee State Certificate of State enclosed	us Certified Copy (Additional copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy opy
		is enclosed)
Mailing Address Amendment Section		Address ment Section
Division of Corporations		n of Corporations
P.O. Box 6327		Building
Tallahassee, FL 32314	2661 Ex	recutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the	Florida Dept. of State)
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	.u. ~ . -di 'The now
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	2103 W Marjory Ave
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33606
	2: (OM)
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	2103 W Marjory Ave
	Tampa, FL 33606
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address Name of New Registered Agent	
(Florida si	treet address)
New Registered Office Address:	. Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
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)

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	PT .	John Doe		
X Remove	<u>v</u>]	Mike Jones		
X Add	<u>SY</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Add	<u>Ires</u> s
1) Change Add Remove				
2) Change Add Remove	-21-71-1			
3) Change Add Remove		 		
4) Change Add Remove		·····		
5) Change Add Remove				
6) Change Add Remove				

	adding additional Art al sheets, if necessary).	(Be specific)			
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If an amendmer	nt provides for an exclimplementing the amelicable, indicate N/A)	hange, reclassificat endment if not cont	ion, or cancellation ained in the amend	of issued shares, iment itself:	
provisions for i (if not apple					
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The date of each amendment(s) ad	loption:	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendme fficient for approval.	nt(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder pted by the incorporators without shareholder action and shareholder	
Dated/	1/4/2012	
Signature		
	rector, president or other officer - if directors or officers have not be t, by an incorporator - if in the hands of a receiver, trustee, or other c	
	ed fiduciary by that fiduciary)	Duit
	Paul Melihian	
	(Typed or printed name of person signing)	
_	Trucipal	
	(Title of person signing)	