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(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
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COVER LETTER

EAGLEMAY Realty 1948 line The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to
Articles of Incorporation

of

EAGLEMAX Realty 1948	/NC		
(Name of Corporation as curren		pt. of State)	
- P/1000063	3346		
(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 amendn	nent(s) to
A. If amending name, enter the new name of the corporation:			
EAGLE-USA REALTU	1 /1/2		
name must be distinguishable and contain the word "corporated "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorp" "Co" A professional corpo	The ne porated" or the abbreviation rame must contain the	
B. Enter new principal office address, if applicable:	3900 W.C	ommercial Bh	44235
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	HAMARAC,	ommercial Blu FL 33309	
	·		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	PO Box	9883 Iderdale, Fi	
	FORT LOS	rderdale, Fi	33310
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address	ress in Florida, enter the na	me of the	
Name of New Registered Agent			
(Florida str	eet address)		
New Registered Office Address:		_, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent	į		
I hereby accept the appointment as registered agent. I am familiar v	vith and accept the obligation	is of the position.	
Signature of New R	egistered Agent, if changing	<u> </u>	
		المسائسة الكري	
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		Fig. 1	

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 Do	<u>oc</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add		_		-
Remove				
Kemove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	cles, enter change(s) he (Be specific)			
	<u> </u>			
				_
<u> </u>				
				
		<u> </u>		
			<u>-</u>	
			· <u>·</u>	
		 -	·	<u>.</u>
f an amendment provides for an exch	ange, reclassification,	or cancellation of	issued shares.	
provisions for implementing the amer (if not applicable, indicate N/A)	ndment if not contained	d in the amendme	nt itself:	
(ң поғаррисате, іпақаң зулғ				

The date of each amendment(s) adoption:, if or	ther than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
hv	
by" (voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was were adopted by the incorporators without shareholder action and shareholder	
action was not required.	
Dated $\frac{10/27/2017}{\text{Signature}}$	
(By a director, president or other officer - if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
appointed fiduciary by mat fiduciary)	
Douglas McKenzie	
(Typed or printed name of person signing)	
Douglas McKenzie (Typed or printed name of person signing) Resident	
(Title of person signing)	

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