## P11000015075

(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nar	me)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	





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Amena.

## **COVER LETTER**

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION:	America	Home Rea	alty of naples, Inc
DOCUMENT NUMBER:	P 11000	0075075	
The enclosed Articles of Amend	iment and fee are subn	nitted for filing.	
Please return all correspondence	concerning this matte	r to the following:	
	meircan H	Firm/ Company	n of naples, Inc
573	10 Golden	Gate Prku	y ste 120
Ne	aples; FL	3416 City/ State and Zip Code	2
E-m	medinaluis	s 43 e Yma I for future annual report	notification)
For further information concern	ing this matter, please	call:	
Luis M	edina	at ( 239	de & Daytime Telephone Number
Name of Contac	t Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the follo	owing amount made pa	yable to the Florida Depa	artment of State:
	43.75 Filing Fee & ertificate of Status enclosed)	□\$43.75 Filing Fee & Certified Copy (Additional copy is (Additional C	
			is enclosed)
Mailing Add Amendment Division of C P.O. Box 632 Tallahassee.	Section Corporations 27	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

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## Articles of Amendment to Articles of Incorporation



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(Name of Corporation as currently filed with the	1 of Naples ITIC he Florida Dept. of State)
PIIC	0000 75075
(Document Number of Corporation	on (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, ts Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corporation	<u>ı:</u>
i	The new
name must be distinguishable and contain the word "corpor "Corp" "Inc.," or Co" or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	or "Co" A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> Principal office address <u>MUST BE A STREET ADDRESS</u> )	
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	5270 Golden Gotte PRWY
	Suite 120
1	Naples, FL 34116
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add	address in Florida, enter the name of the dress:
Name of New Registered Agent	
(Florie	da street address)
New Registered Office Address:	, Florida
(	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A	gent:
I hereby accept the appointment as registered agent. I am fam	mar with and accept the obligations of the position.
	ered 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: <u>X</u> Charige	<u>РТ</u> <u>Jo</u>	hn Doe	
X Remove	<u>V</u> <u>M</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	ally Smith	•
ï			
Type of Action (Check One)	Title	Name	<u>Addres</u> s
Change Add Remove		6109a Velez	8285 Ibis club dire # 804 Naples, FL 34104
Change Add Remove	<del></del>		
Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

amending or addin tach additional shee	ets, if necessary).	(Be specific)	LIST HEIE.		
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an amendment pro provisions for imple (if not applicable	ementing the amo	hange, reclassific endment if not co	cation, or cancel ontained in the a	lation of issued mendment itse	shares, lf:
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The date of each amendment(s) adoption	on: 07/06/2012
Effective date if applicable:	07/06/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes cast for the amendment(s) ent for approval.
	d by the shareholders through voting groups. The following statement a voting group entitled to vote separately on the amendment(s):
"The number of votes cast for th	ne amendment(s) was/were sufficient for approval
lby	(voting group)
	(voting group)
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholder
Dated 09/	06/2012
Signature	201/1
(By a direct selected, by	or, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other court iduciary by that fiduciary)
	Lois. Medina
	(Typed or printed name of person signing)
·	President
	(Title of person signing)