# P11000085574

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(Ad	ddress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	<del>e</del> #)
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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: GOLDEN ISLES	REALTY AND MANAG	EMENT, INC
DOCUMENT NUMBI	ER: <u>P 11000083574</u>	· · · · · · · · · · · · · · · · · ·	
The enclosed Articles o	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
	Maggie Ivanovski		
<del>-</del>	80.0	Name of Contact Persor	)
_	Golden Isles Realty		
		Firm/ Company	
_	437 Golden Isles Di	r, # 10C	
		Address	
_	Hallandale Beach,	FL 33009	
		City/ State and Zip Code	•
	Girm.realty@hotmail.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Maggie	Ivanovski	at (954	) 646 2573
Name of Contact Person		Area Coo	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
\$35 Filing Fee	☐\$43.75 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)
Amen Divisi P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee, FL 32314	Amenda Division Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

## GOLDEN ISLES REALTY AND MANAGEMENT, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

### P 11000083574

(Document Number of Corneration (if known)

. If amending name, enter the new name of the corporati	<u>1911.</u>	
GOLDEN ISLES REALTY,CORP.	ord "corporation." "company," or "incorporated" or the	_The
ew name must be distinguishable and contain the wo breviation "Corp.," "Inc.," or Co.," or the designation "( ontain the word "chartered," "professional association," or	Corp," "Inc," or "Co". A professional corporation name n	ne a must
. Enter new principal office address, if applicable:	2699 Stirling Rd. # C303. Forth Lauderdale. FL 33	3312
Principal office address <u>MUST BE A STREET ADDRESS</u> )	) 	2
		<u></u>
		$\equiv$
. Enter new mailing address, if applicable:	$\hat{\mathcal{G}}_{\mathcal{S}}^{(k)}$	ယ်
(Mailing address MAY BE A POST OFFICE BOX)	same as above	<del></del>
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		<b></b>
. If amending the registered agent and/or registered office a new registered agent and/or the new registered office a		
	<del>part rout</del>	
Name of New Registered Agent N/A		
	orida street address)	
AT:		
(Fle	oriau sireer auaress)	
New Registered Office Address: N/A	Florida	

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 <math>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>	<u>Name</u>	<u>Addres</u> s
1) Change		_ MA	
Add			
Remove			
2) Change		_ MA	
Add			
Remove			
3) Change		N/A	
Add		/	
Remove			
4) Change		N/A	
Add		,	
Remove			
5) Change		NIA	
Add			
Remove			
6) Change		N/B	
Add		!	
Remove			

	necessary). (Be spec	1//1		
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amendment provides f visions for implementi (if not applicable, indic	ng the amendment if	lassification, or cancell not contained in the a	nendment itself:	
		/		
		/		
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		7		
		/		

The date of each amendment(s) adoption: 08/22/2016 other than the date this document was signed.	_, if
Effective date if applicable: USIZZ ZVIV (no more than 90) days after amendment file date)	
(nb 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 listed document's effective date on the Department of State's records.	i 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	
by"  (voting group)	
(voling 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 08/22/2016	
Signature M. Mulleccei	
(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)	
Magdalene Ivanovski	
(Typed or printed name of person signing)	
President	
(Title of person signing)	