# P11000088031

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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Florida Real Estate and Property Management
DOCUMENT NUMBER: PIIOOO88031
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kathaleen McClary Name of Contact Person  FLORIDA Real Estate and Property Management Team, Inc Firm/ Company  3539 Osprey Cove Drive Address Riverviaw, Fr. 33578
City/ State and Zip Code  Kathaleenmeday@ tamabay.rr. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Kathaleen McClary at (813) 326-1586  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is enclosed)  \$35 Filing Fee Certificate of Status  (Additional copy is enclosed)  \$35 Filing Fee Certified Copy Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section  Division of Corporations  Street Address  Amendment Section  Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 1, 2011

KATHALEEN MCCLARY 3539 OSPREY COVE DRIVE RIVERVIEW, FL 33578

SUBJECT: FLORIDA REAL ESTATE AND PROPERTY MANAGEMENT TEAM.

INC

Ref. Number: P11000088031

We have received your document for FLORIDA REAL ESTATE AND PROPERTY MANAGEMENT TEAM, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please check only one box.

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 811A00026914



### FLORIDA DEPARTMENT OF STATE Division of Corporations

December 12, 2011

KATHALEEN MCCLARY 3539 OSPREY COVE DRIVE RIVERVIEW, FL 33578

SUBJECT: FLORIDA REAL ESTATE AND PROPERTY MANAGEMENT TEAM,

INC

Ref. Number: P11000088031

We have received your document for FLORIDA REAL ESTATE AND PROPERTY MANAGEMENT TEAM, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is trying to change the registered agent, please fill out part " D " of your form. The title " RA" is not a acceptable title for the officer/director Kathaleen McClary. Please see enclosed information.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 711A00027608

## Articles of Amendment to Articles of Incorporation

Florida Real Estate and	1 Propert	y Manag	ment.	Team, In
Chame of Corporation as Carrently	ined with the rid	ZII A	ΔΔΔ ~~ Δ	21
(Document Number of	of Cornoration (if)	(nown)	000880	21
(Document Number C	or Corporation (II i	(ilowii)		
Pursuant to the provisions of section 607.1006, Floamendment(s) to its Articles of Incorporation:	orida Statutes, thi	s Florida Profit	Corporation as	dopts the following
A. If amending name, enter the new name of the	corporation:			
The new name must be distinguishable and contain tabbreviation "Corp.," "Inc.," or Co.," or the designame must contain the word "chartered," "profession	gnation "Corp," '	'Inc," or "Co".	A professional	rated" or the corporation
B. Enter new principal office address, if applicab		<del></del>		
(Principal office address MUST BE A STREET AD	ODRESS )			**************************************
			· · · · · · ·	<i>₹</i> ∞
			· · · · · · · · · · · · · · · · · · ·	
C. Enter new mailing address, if applicable:				が一般
(Mailing address <u>MAY BE A POST OFFICE B</u>	<u>ox</u> )	<del></del>		<del>3 3</del> <del>3</del> <del>3</del>
				mo to m
				25 N
D. If amending the registered agent and/or register		ss in Florida, ent	er the name of	the
new registered agent and/or the new registered	a office address:			
Name of New Registered Agent:				
	(Florida street	address)		
New Registered Office Address:			, Florida	
	(City)			Zip Code)
	•			
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent.		h and accent the	obligations of th	ne position
A secretaring attachment and addition and addition				· · · • · · · · · · · · · · · · · · · ·
Signature of N	lew Registered Ag	ent if changing		

If AMENDING t	he Officers and/or Directors, please list all	officers/directors of the corporation as you now want
the record to be. I	Please indicate the title(s), name and address	for each officer/director.
	n index up to 6 officers/directors. If you hav	ve more than 6 officers/directors, please list them on an
additional sheet.)	•	
Title(s)	Name	Address
$_{\rm n}$ $\rho$	mathew Miclary	3516 36th Street E.
•/1	1110011000 1110100 7	3516 36th Street E. Bradenton, Fr.
		34208
<i>(</i> )	Maland Malan	
2) <u>Y Q</u>	Michael Melan	3539 Osprey Cone Dr
	•	RIVERVIEW FL
_	- ) -0.001	33578
3) S	Zachary McClary	1213 Princeton
<u>.,</u>	CARSTILL TOTAL	Bradenton, Fr
	<u>.</u>	34207
10 D	David L. Walker	00 00 000
4) []	David L. Walter	PO OOK ayo
		2112 20'
	•	
5)	· _	the same of the sa
· <del>- •</del>	<del></del>	
		<u> </u>
•		
6)	4	
	•	
1¢DEMOVING a		->
II KEMOVING AI	n officer and/or director, please list the title!	s) and name of the officer/director to be removed:
Title(s)	Name Tit	tle(s) <u>Name</u>
n	4)	
· <i>J.</i>		
2)	5)_	

If amending or adding additional Arti (attach additional sheets, if necessary).	(Be specific)	nere:	
			, <u>,</u>
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(if not i	for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)
(ij noi t	pproducts, museum 1971;
<del>,</del>	
	•
	ch amendment(s) adoption:
he date of eac	ch amendment(s) adoption:
fective date	f applicable:
	(no more than 90 days after amendment file date)
doption of A	mendment(s) (CHECK ONE)
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	(3.13.5.1-3.1.13)
he amendn	nent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
by the share	holders was/were sufficient for approval.
1 m	The Cillarian statement
	nent(s) was/were approved by the shareholders through voting groups. The following statement arately provided for each voting group entitled to vote separately on the amendment(s):
musi oc sep	arately provided for each rolling group chimica to role separately on the amendment(s).
	umber of votes cast for the amendment(s) was/were sufficient for approval
1	(voting group)
ъу	(voting grown)
r	(voting group)
The amendn	nent(s) was/were adopted by the board of directors without shareholder action and shareholder
action was n	
1	
	nent(s) was/were adopted by the incorporators without shareholder action and shareholder
action was n	or required.
	Dated //-26-//
	Dated // 26-//
	- ///A MECAM
	Signature /// = Cuy
	(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)
	wppointed reductory organic reductory)
	MATHEW M. CLAPLE
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)  PRESIDENT