P11000108248

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SEGREDARY OF STATE

Mayor

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Executive	Realty & Property Management Inc				
DOCUMENT NUMBER: P110001082					
The enclosed Articles of Amendment and fee are					
Please return all correspondence concerning this n	natter to the following:				
Melissa Lebron					
	Name of Contact Person				
Executive Realty	Executive Realty & Property Management Inc				
	Firm/ Company				
2901 NE 70th S	t				
	Address				
Ocala FI 34479					
	City/ State and Zip Code				
reoagentmelissa@g	amail.com				
	used for future annual report notification)				
`	•				
For further information concerning this matter, ple	ease call:				
Melissa Lebron	at (352) 369-2020				
Name of Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:				
■ \$35 Filing Fee	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy is enclosed)				
Mailing Address 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 Articles of Incorporation of

Executive Realty & Prope	erty Management	Inc	
(Name of Corporation as	currently filed with the Flor	ida Dept. of State)	
P11000108248			
(Document	Number of Corporation (if ki	nown)	
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this <i>Flo</i>	orida Profit Corporation ad	opts the following amendment(s)
A. If amending name, enter the new name	me of the corporation:		
			The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designa word "chartered," "professional associati	ution "Corp," "Inc," or "Co	". A professional corporal	
B. <u>Enter new principal office address, if</u> (Principal office address <u>MUST BE A ST</u>			
C. Enter new mailing address, if applic (Mailing address MAY BE A POST O			
(mutting uturess MAT DE A FOST O	<u> </u>		
	•		
D. If amending the registered agent and	l/or registered office address	s in Florida, enter the nam	e of the
new registered agent and/or the new	registered office address:		
-Name of New Registered Agent			
-	(Florida street	address)	
N D :	·	,	
New Registered Office Address:	(City)	, Florida	(Zip Code)
	·		

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1)ChangeAddXRemove	D	Stephanie M Spink	PO BOX 1989 Ocala FI 34479
2) Change Add Remove	Р	Melissa Lebron	2901 NE 70th St Ocala Fl 34479
3) Change Add Remove			
4)ChangeAddRemove			
5) Change Add Remove			
6) Change Add Remove			

If amending or adding additional Artic (attach additional sheets, if necessary).	(Be specific)
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If an amendment provides for an exchaprovisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) :	January 21st, 2012	
Effective date <u>if applicable</u> :	anuary 21st, 2012	
<u> </u>	(no more than 90 days after amendment file	date)
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the ufficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The following group entitled to vote separately on the amend	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ac action was not required.	lopted by the board of directors without shareholder action a	nd shareholder
☐ The amendment(s) was/were ac action was not required.	lopted by the incorporators without shareholder action and sl	hareholder
Dated_ Janua	Lephanie M Spin	K.
select	director, president or other officer – if directors of officers hed, by an incorporator – if in the hands of a receiver, trustee, ited fiduciary by that fiduciary)	
	Stephanie M Spink	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	