## P12000028443

(Re	equestor's Name)		
(Address)			
(Ac	dress)		
(Ci	ty/State/Zip/Phone	:#)	
PICK-UP	☐ WAIT	MAIL	
(Ві	isiness Entity Nam	ne)	
(Do	ocument Number)		
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SECRETARY OF STATE
ALLARASSEE, FLOREIA

NOV 2.7 2012 T. LEMIEUX

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Probate Ho	me Buyers, Inc.	
DOCUMENT NUMBER: P1200002844	3	
The enclosed Articles of Amendment and fee are sub		
Please return all correspondence concerning this mat	ter to the following:	
Ronnie Williams		
	Name of Contact Person	l
Probate Home Bu	ıyers, Inc	
<del> </del>	Firm/ Company	
PO Box 110056		
	Address	
Naples, FL 34108	}	
	City/ State and Zip Code	•
investorwendy@gma	il.com	
	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
Ronnie Williams	<sub>at (</sub> 239	333 4373
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\times \text{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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Probate Home Buyers, Inc.		
(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
P12000028443		
(Document Number of Corporation (if	(nown)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	orida Profit Corporation adopts the following a	imendment(s) t
A. If amending name, enter the new name of the corporation:		
	T	he new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must con	
B. Enter new principal office address, if applicable: (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)		
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent	<del>.</del>	
(Florida stree	t address)	
New Registered Office Address:	, Florida	
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar wi	(Zip Code)	F IL
	For Facilities	ED PM 10: 42
Signature of New Registered Ag	tent, if changing	: 42

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 Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Peter Schmuck	PO Box 110056
Add			Naples, FL 34108
X Remove			
2) Change	Р	Ronnie Williams	PO Box 110056
X			Naples, FL 34108
Remove			
3) Change			
Add			
Remove			
4) Change	<del></del> -		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
•	
If an amandment provides for an arch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amel (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij noi applicable, indicale WA)	

The date of each amendment(s) ac	doption: 11/20/2012
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
	(voting group)
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 11/202	2/2012
Signature	2/2012 Pomi alilmos
(By a <sup>o</sup> d selecte	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)
арреш	Ronnie Williams
	(Typed or printed name of person signing)
	President
	(Title of person signing)