## 112000040134

| (Re                     | equestor's Name)   | · · · · · · · · · · · · · · · · · · · |
|-------------------------|--------------------|---------------------------------------|
| (Ac                     | ldress)            |                                       |
| (Ac                     | ddress)            |                                       |
| (Ci                     | ty/State/Zip/Phone | e #)                                  |
| PICK-UP                 | MAIT               | MAIL                                  |
| (Ви                     | usiness Entity Nar | ne)                                   |
| (Do                     | ocument Number)    | <u> </u>                              |
| Certified Copies        | _ Certificates     | s of Status                           |
| Special Instructions to | Filing Officer:    |                                       |
|                         |                    |                                       |
|                         |                    |                                       |
|                         |                    |                                       |

Office Use Only



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JUN 20 2012 T. ROBERTS

## **COVER LETTER**

TO: Amendment Section

| Division of Corpor                         | rations                                     |  |  |  |
|--|---|--|--|--|
| NAME OF CORPORA                            | ATION: All Around                           | Realty, Inc.   |  |  |
| DOCUMENT NUMBI                             | <sub>ER:</sub> P1200004013                  | 4  |  |  |
| The enclosed Articles of                   | f Amendment and fee are su                  | bmitted for filing.  |  |  |
| Please return all corresp                  | ondence concerning this ma                  | tter to the following:   |  |  |
| ,  | Arthur Suskevich                            |  |  |  |
| -  |   | Name of Contact Person   | 1  |  |
| _  |   | Firm/ Company  | ·····  |  |
| i  | P.O. Box 7532                               |  |  |  |
| _  |   | Address  |  |  |
| <u> </u>                                   | Fort Myers, FL 3                            | 3919   |  |  |
|  |   | City/ State and Zip Code   |  |  |
| art@                                       | allaroundagents                             | s.com  |  |  |
|  |   | sed for future annual report                                       | notification)  |  |
|  |   |  |  |  |
| For further information                    | concerning this matter, pleas               | se call:   |  |  |
| Arthur Suskev                              | vich  | <sub>at (</sub> 239  | 565-5923<br>de & Daytime Telephone Number  |  |
| Name of                                    | Contact Person                              | Area Coo   | de & Daytime Telephone Number  |  |
| Enclosed is a check for                    | the following amount made                   | payable to the Florida Depa  | artment 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) |  |
| Mailing Address Street Address             |   |  |  |  |
| Amendment Section Division of Corporations |   | Amendment Section Division of Corporations                         |  |  |
| P.O. Box 6327 Clifton Building             |   |  |  |  |
| Tallal                                     | nassee, FL 32314                            | 2661 E   | xecutive Center Circle<br>ssee, FL 32301   |  |

## **Articles of Amendment** to Articles of Incorporation of



All Around Realty, Inc.

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

dment(s) to

| P12000040134   |                              |                               | 10.4                         |
|--|------------------------------|-------------------------------|------------------------------|
| (Documen   | t Number of Corporation (i   | f known)                      |                              |
| Pursuant to the provisions of section 607. its Articles of Incorporation:  | 1006, Florida Statutes, this | Florida Profit Corporation 2  | adopts the following amendme |
| A. If amending name, enter the new na  | me of the corporation:       |                               | The new                      |
| name must be distinguishable and com<br>"Corp.," "Inc.," or Co.," or the design<br>word "chartered," "professional associa | ation "Corp," "Inc," or "    | Co". A professional corpor    | orated" or the abbreviation  |
| B. Enter new principal office address,<br>(Principal office address MUST BE A S  |                              | 8695 College P                | kwy. #1300                   |
|  | ,<br>,                       | Fort Myers, FL                | 33919                        |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)                                    |                              | P.O. Box 7532                 |                              |
|  |                              | Fort Myers, FL                | 33919                        |
| D. If amending the registered agent an new registered agent and/or the new   |                              |                               | me of the                    |
| Name of New Registered Agent   | Arthur Suskevicl             | h                             | _                            |
|  | 8695 College Pl              | kwy. #1300                    | -                            |
|  | (Florida str                 | eet address)                  | -                            |
| New Registered Office Address:   | Fort Myers                   | , Florida                     | <u>,33919</u>                |
|  | (City)                       |                               | (Zip Code)                   |
| New Registered Agent's Signature, if cl  |                              |                               |                              |
| I hereby accept the appointment as regist  | ered agent. I am familiar v  | vith and accept the obligatio | ns of the position.          |
| Sig  | gnature of New Registered A  | Igent, 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             | <u>PT</u>    | John Doe    |                 |
|-------------------------------|--------------|-------------|-----------------|
| X Remove                      | <u>v</u>     | Mike Jones  |                 |
| X Add                         | <u>sv</u>    | Sally Smith |                 |
| Type of Action<br>(Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change<br>Add<br>Remove    |              |             |                 |
| 2) Change<br>Add<br>Remove    |              |             |                 |
| 3 ) Change Add Remove         |              | _           |                 |
| 4) Change<br>Add<br>Remove    |              |             |                 |
| 5) Change Add Remove          |              |             | <br>            |
| 6) Change<br>Add<br>Remove    |              | _           |                 |

| ange, reclassification<br>dment if not contain | or cancellation of isseed in the amendment | sued shares,<br>itself:   |
|--|--|---|
|  |  |   |
|  |  |   |
|  |  |   |
|  | · -  |   |
|  |  |   |
|  |  |   |
|  | ange, reclassification,                    | ange, reclassification, or cancellation of issuadment if not contained in the amendment |

| · · · · The date of each amendment(s) adoption                               | (a-1)(3-1)(2)  |
|--|--|
| •  | The second secon |
| 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 adopted b by the shareholders was/were sufficien | y the shareholders. The number of votes cast for the amendment(s) t for approval.  |
|  | by the shareholders through voting groups. The following statement toting 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)   |
| ☐ The amendment(s) was/were adopted b action was not required.               | y the board of directors without shareholder action and shareholder  |
| The amendment(s) was/were adopted b action was not required.                 | y the incorporators without shareholder action and shareholder   |
| Dated June 13,   | 2012   |
| Signature M  | 1 h that h   |
|  | president or other officer – if directors or officers have not been  |
|  | n incorporator – if in the hands of a receiver, trustee, or other court aciary by that fiduciary)  |
| • •  | • •  |
| Arth   | nur Suskevich  |
| •  | (Typed or printed name of person signing)  |
| Pre  | sident   |
|  | (Title of person signing)  |