# 7/2000/1802

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(Ac	idress)	
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(Cit	ty/State/Zip/Phone	e #)
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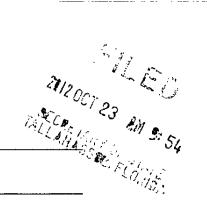
Angelia de la companya della company

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: Diplom DOCUMENT NUMBER: P1200004		front Realt	y, Inc.
The enclosed Articles of Amendment and fe	e are submitted f	or filing.	
Please return all correspondence concerning	this matter to the	following:	
Galina Kornt	olum		
	Name	of Contact Person	1
Diplomat Oc	eanfront F	Realty, Inc.	
	F	irm/ Company	
3535 S. Oce	an Drive,	#602	
		Address	
Hollywood, F	L 33019		
	City/	State and Zip Cod	e
galinakornblum@	nodeva	nm	
•		ture annual report	notification)
For further information concerning this matter	er, please call:		
Galina Kornblum		at (323	, 620-9908
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amoun	t made payable t	o the Florida Depa	artment of State:
\$35 Filing Fee  \$\square\$	Status Cert (Add	75 Filing Fee & ified Copy itional copy is osed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address		Street	Address
Amendment Section		Amendment Section	
Division of Corporations			on of Corporations
P.O. Box 6327			Building
Tallahassee, FL 32314			Executive Center Circle assee, FL 32301

# **Articles of Amendment Articles of Incorporation**



# Diplomat Oceanfront Realty Inc.

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

## P12000044802

(Document Number of Corneration (if known)

nent(s) to

. If amending name, enter the new name of the	e corporation:			
				The
ame must be distinguishable and contain the value.  "Corp.," "Inc.," or Co.," or the designation "Co "Cord "chartered," "professional association," or a	orp," "Inc," or "C	o". A professio		
Enter new principal office address, if applica	able:			···
Principal office address <u>MUST BE A STREET A</u>	ADDRESS )			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)			
<u></u>				
				·····
. If amending the registered agent and/or reginew registered agent and/or the new register		ss in Florida, er	nter the nam	e of the
. If amending the registered agent and/or reginew registered agent and/or the new register		ss in Florida, er	ter the nam	e of the
new registered agent and/or the new register				e of the
new registered agent and/or the new register	red office address:			e of the
new registered agent and/or the new register	red office address:			e of the
Name of New Registered Agent  Name of New Registered Agent	red office address:			
new registered agent and/or the new register	red office address:			
Name of New Registered Agent  Name of New Registered Agent	red office address: (Florida stree			
Name of New Registered Agent  Name of New Registered Agent	red office address: (Florida stree			
Name of New Registered Agent  Name of New Registered Agent	red office address:  (Florida stree  (City)  Registered Agent:	et address)	, Florida_	(Zip Code)

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> <u>Mike</u>	e Jones	
X Add	SV Sally	<u> / Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	MGR	Malgorzata Gudat	2100 Keystone Blvd.
Add			North Miami, FL 33181
X Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change	<del></del>	<del></del>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			
			<del></del>

, , , , , , , , , , , , , , , , , , ,	(Be specific)
	<del>-</del>
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
provisions for implementing the amer	

The date of each amendment(s) a	doption: 10/17/12
Effective date <u>if applicable:</u> 10	0/17/12
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach 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)
	(voung group)
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
Dated 10/17/	2012
Dated	
	Man
Signature	frector, president or other officer - if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court
	nted fiduciary by that fiduciary)
<del>-</del> -pp	, 6,, 7
	(Typed or printed name of person signing)
	President
	(Title of person signing)