P12000078537

(R	equestor's Name)	
(A	ddress)	
A)	ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
(C	Oocument Number)	
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13 AUG -8 AH 9: OL SECRETARY OF STATE

C. LEWIS

AUG 1 # 2013

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

mene or com outrien.		& Home Brol	kerage, Inc.
DOCUMENT NUMBER: P12000	010001		
The enclosed Articles of Amendment and i	ee are submitted	for filing.	
Please return all correspondence concerning	g this matter to th	e following:	
Francis M.			
Boyer Law		e of Contact Person	
9471 Bayr		Firm/ Company S Road, Su	uite 404
Jacksonvil	le, FL 32	Address 2256	
	City/	State and Zip Code	<u> </u>
FBoyer@Boy	erLawFi	m.com	
		sture annual report	notification)
For further information concerning this mat	ter, please call:		
Francis M. Boyer		_{at (} 904	236-5317
Name of Contact Person			le & Daytime Telephone Number
Enclosed is a check for the following amou	nt made payable	to the Florida Depa	rtment of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of	Status Cer (Ad	7.75 Filing Fee & tified Copy ditional copy is losed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations		Amend	Address ment Section n of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

FILED 13 AUG -8 AM 9: 04

Florida Business & Home Brokerage, Inc.

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

P12000078537

(Document Number of Corporation (if known)

ent(s) to

A. If amending name, enter the new name of the corporation: Global Keystone Realty, Inc.		The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	". A professional corporati	ited" or the abbreviation on name must contain the
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 address new registered agent and/or the new registered office address:	s in Florida, enter the name	of the
Name of New Registered Agent		
(Florida stree	address)	
New Registered Office Address:	, Florida	
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with	h and accept the obligations o	of the position.
Signature of New Registered Ag	ent, 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.

X Change	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	<u>Addres</u> s
1) Change		9471 Baymeadows Road, Suite 404
Add		
Remove		
2) Change		
Add		
Remove		
3) Change		
Add		
Remove		
4)Change		
Adđ		
Remove		
5) Change		
Add		
Remove		
6) Change		
Add		
Remove		

ttach <i>additional</i>	dding additional And sheets, if necessary)). (Be specific,)		
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		. .			
an amendmeni	t provides for an ex	change reclass	ification or can	rallation of issued	Leharae
<u>rovisions for i</u>	mplementing the an	nendment if not	contained in the	e amendment itse	lf:
(if not appli	cable, indicate N/A)				
					_
					-
				- '\-	-
			,		
					

The date of each amendment(s) adoption: _____ 13 AUG -8 AM 9: 04 date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) AHASSEE. FLORIDA Adoption of Amendment(s) (CHECK ONE) ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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 (voting group) ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Signature (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) Francis M. Boyer (Typed or printed name of person signing) President (Title of person signing)