P12000100770

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(В.	siness Entity Nam	ne)
(=-	,	·- ,
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
`>	Office Use Onl	v



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(PRM)

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: ORLANDO	INTERNATION	AL REALTY INC	T
	ER: P1200010077			-33.5
	f Amendment and fee are su			7.79.05
Please return all corres _i	pondence concerning this mat	tter to the following:		(3)
	GARY PETE HAI	RRIS		
-		Name of Contact Person	,	
	ORLANDO INTE	RNATIONAL RE	ALTY INC	
-		Firm/ Company		
	5654 MARQUES	AS CIRCLE		
-		Address		····
	SARASOTA, FLO	ORIDA 34233		
-		City/ State and Zip Code)	
DE-	ΓER@FLIGUSA.(COM		
<u> </u>		sed for future annual report	notification)	
		•		
For further information	concerning this matter, pleas	se call:		
GARY PETE	HARRIS	_{at (} 941	914-4330 de & Daytime Telephone Nur	
Name o	f Contact Person	Area Co	de & Daytime Telephone Nur	nber
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)	
	ling Address		Address	
	ndment Section sion of Corporations	Amendment Section Division of Corporations		
	Box 6327		Building	
Talla	hassee, FL 32314	2661 E	Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

ORLANDO INTERNATIONAL REALTY INC

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

P1	20	ነበ	n.	10	n	77	'n
	– 1	J L 1		11	"	, ,	

ent(s) to

	me of the corporation:	<u>:</u>	
N/A			
name must be distinguishable and con: "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," o	or "Co". A profession	
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if appli	icable:		QUESAS CIRCLE
(Mailing address MAY BE A POST OFFICE BOX)		5054 IVIAR	QUESAS CIRCLE
		SARASOTA, FLORIDA	
		34233	
D. If amending the registered agent an new registered agent and/or the new	w registered office add	ress:	
Name of New Registered Agent	5654 MARQL		· 느
Name of New Registered Agent	(Florida	a street address)	· <u>·</u>
Name of New Registered Agent New Registered Office Address:	(Florida SARASOTA		, Florida 34233 (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 4dd

Example:	iove, una saity smi	in, sv as an Aua.	
X Change	<u>PT</u> <u>Johr</u>	1 Doe	00 T 2
X Remove	<u>V</u> <u>Mik</u>	e Jones	22
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address REE 2
1) Change	PRES	JULIE CURREY	5654 MARQUESAS CIRC
Add			SARASOTA, FLORIDA
Remove			34233
2) Change	VP	CAROLYN J HARRIS	5571 MARQUESAS CIRCL
Add			SARASOTA, FL
Remove			34233
3) Change	PRES	GARY PETE HARRIS	5571 MARQUESAS CIRC
Add			SARASOTA, FL
✓ Remove			34233
4) Change	VP	GARY PETE HARRIS	5654 MARQUESAS CIRCL
Add			SARASOTA, FL
Remove			34233
5) Change			
, Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		ES E
EW ADDRESS OF CORPORATION IS: 5654 MARQUESAS C	IRCLE, SARAS	
LORIDA, 34233		13
		PH 3: 24
	·	<u> </u>
		— 高麗 2
		· · · · · · · · · · · · · · · · · · ·
If an amendment provides for an exchange, reclassification, or cancellation o	fissued shares.	
provisions for implementing the amendment if not contained in the amendm	ent itself:	
(if not applicable, indicate N/A)		

The date of each amendment(s) adoption: AUGUS 1 5, 2014 date this document was signed.	, if other than the
Effective date if applicable: AUGUST 5, 2014	
(no more than 90 days after amendment file day	te)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the arby the shareholders was/were sufficient for approval.	nendment(s)
The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes cast for the amendment(s) was/were sufficient for approval	TAL SE
by" (voting group)	8 77
The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shar action was not required. Dated Signature (By a director, president or other officer – if directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, or appointed fiduciary by that fiduciary)	reholder 03.25
GARY Pete HARP: S Typed or printed name of person signing) President / Share A	