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DR 3/4/13

COVERLETTER

Division of Corporations EQUITY REALTY PARTNERS CORP NAME OF CORPORATION: P1 3000000 952 DOCUMENT NUMBER: __ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: SUITY REATY PANTNENS CORP 3E Ocean Blud , Stc 205 8 hurt Fa 34994 City State and Zin Code really partners Ogmail, com

diress: (to be used for future annual report notification) For further information concerning this matter, please call: _____at (<u>772</u>) <u>6311788</u> Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$52.50 Filing Fee □\$43.75 Filing Fee & ■\$43.75 Filing Fee & Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

TQ: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

FILED

• '	Articles of Incorporation	FILLU	
EA	of	2013 MAR - 1/AM	9: 38
- EQUIT	Y ILEALTY I	ANTHERS COR	Fantos
	ently filed with the Florida Dep	<u>nor State) () New Yorks</u> FALL AHASSEE, FL	ORIDA
P/300			_
(Document Nun	nber of Corporation (if known)	**	
Pursuant to the provisions of section 607-1006, ts Articles of Incorporation:	Florida Statutes, this Florida Pro	fit Corporation adopts the following	ng amendment(s)
s. If amending name, enter the new name of	the corporation:		
ame must be distinguishable and contain th			_The new
"Corp.," "Inc.," or Co.," or the designation word "chartered." "professional association." B. Enter new principal office address, if app	or the abbreviation "P.A."	dessional corporation name must	contain the
Principal office address <u>MUST BE A STREE</u>	<u>I_ADDRESS</u>)		
			_
			_
2. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	CE DZIN'I		
Graning moress MAT DE ST OST OFFIC	.D. DU.M		
	-		
			_
. If amending the registered agent and/or r new registered agent and/or the new regis	egistered office address in Flori stered office address;	da, enter the name of the	
Name of New Registered Agent	•		
	(Florida street address)		
New Registered Office Address:		, Florida	
Men Regimerea Office Manery.	(CA)	(Zip Code)	_
lew Registered Agent's Signature, if changir hereby accept the appointment as registered a		and they adding a court of the second of the	
истом октори те арранитені ав registerea a	gem – i am jammar with and acc	cpi incoorigations of the position.	
			
Signature	e of New Registered Agent, if cha-	nging	

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 tale:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Charman 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, Saily 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> <u>John</u>	Doe	
X Remove	V Mike	e Jones	
<u>X</u> Add	<u>SV</u> <u>Sally</u>	<u>; Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	Address SE 12 into Street
1) Change	MNG	David O'Kelley	2086 SE 13 isbee Stree Port St Lucie, FL 34952
Add			
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

th additional sheets, if necessary)	ticles, enter change(s) here: (Be specific)
EIN#	46-1671682
isions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
if not applicable, indicate N/A)	

The date of each amendment(s) adoption: 2/14/2013
Effective date if applicable: 2/14/2013
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the shareholders. The number of votes east 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 vast for the amendment's was/were sufficient for approval
by
☐ 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.
Dated 2/14/2013
Signature (Byar Officetor, president or other officer – if directors or officers have not been
Relected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or project name of person signing)
Owner Registered Agent President