P13000035293

(Re	questor's Name)			
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SECRETARY OF STATE

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: Americus Realty C	lorp	
DOCUMENT NUMB	D12000025202		
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:	
(Colette Robertson		
-	-, ·	Name of Contact Person	1
,	Americus Realty Corp		
_		Firm/ Company	
3	398 Seminole Woods Blvd		
-	,	Address	
(Geneva, FL 32732		
_		City/ State and Zip Code	e
colette	@americusrealty.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Colette Robertson		at (<u>9</u> 04	383-8185
Name o	f Contact Person	Area Co	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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Americus Realty Corp				
(Name o	of Corporation as current	ly filed with the Florida Dept. of State)		
P13000035293				
	(Document Number of	of Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the fol	lowing ame	ndment(s) to
A. If amending name, enter the new na	ame of the corporation:			
Orlando City Realty Corp.			The	new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or "Co". A professional corporation name "P.A."	the abbrevi	ation
B. Enter new principal office address, if applicable:		398 Seminole Woods Blvd, Geneva, FL 32732		
(Principal office address MUST BE A S				
				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PO Box 1260, Geneva, FL 32732		
D. If amending the registered agent an new registered agent and/or the ne				— — ₹
	N/A		ران نصر)LL SEC
Name of New Registered Agent	N/A		 8	
		treet address)		AR F
	N/A		7	
New Registered Office Address:		(City) Florida (Zip Co		STATE ORIE
New Registered Agent's Signature, if o	hanging Registered Agen	••	σ.	3>
I hereby accept the appointment as regis	tered agent. I am familiar	<u></u> with and accept the obligations of the pos	ition.	
	Signature of New	Registered Agent 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 <math>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>T9</u>	John D	<u>0e</u>		
X Remove	<u>v</u>	Mike Jo	<u>ones</u>		
_X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s	
1) Change			N/A		
Add				 	
Remove					
2) Change		_			
Add				 	
Remove					33 <u>4</u>
3) Change	-	_		AUG	
Add				<u> </u>	ASS ASS
Remove					1
4) Change				?: 35	STATE
Add				 	
Remove					
5) Change					
Add				-	
Remove					
6) Change		-			
Add					
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
N/A		
WILL		
	 	
		
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		, ta
	₹.	95
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	ა 5	315
provisions for implementing the amendment if not contained in the amendment itself:		· ·
(if not applicable, indicate N/A)		
N/A		
_ 		
<u> </u>		

The date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	l not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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	→ Äs
by" (voting group)	ECF
(voting group)	UG AST
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	FILED VRY OF VSSEELH
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	STATE LORIDA 2: 35
Dated8 28 2 5	-
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)	
Colette Robertson	
(Typed or printed name of person signing)	
President	
(Title of person signing)	