P130000046931

(Requ	estor's Name)	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nan	ne)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer:	





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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Central Florida's ro	yal realty Inc.		
	BER: P13000046931		 _	
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corre	espondence concerning this man	tter to the following:		
	DeAnna Greenwood			
		Name of Contact Persor	1	
	Central Florida's Royal Realty	y Inc		
		Firm/ Company		
	P O Box 291072			
	, , , , , , , , , , , , , , , , , , ,	Address		
	Port Orange Fl 32129			
		City/ State and Zip Code	2	
	askroyalrealty@gmail.com			
		sed for future annual report	notification)	
For further informati Kate Moore	on concerning this matter, pleas	se call: at (506-1935	
Namo	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:	
S35 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		Street Address		
Amendment Section		Amendment Section		
	vision of Corporations D. Box 6327	Division of Corporations The Centre of Tallahassee		
P.O. Box 6327 Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810		

Tallahassec, FL 32303

Articles of Amendment to Articles of Incorporation of

Central Florida's royal Realty Inc.

(Name o	of Corporation as currently	filed with the Florida D	ept. of State)	
P13000046931				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation	adopts the following	; amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	N/A		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Co" chartered," "professional association,"	Torp," "Inc," or "Co". A			n "Corp.,"
B. Enter new principal office address, (Principal office address MUST BE A S		/		
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)		W/A.		
D. If amending the registered agent an new registered agent and/or the new			name of the	9: 01 3: 01
Name of New Registered Agent	DeAnna Greenwood			
	(Florida stre	ot address)		
	765 taylor rd Port Orange F	•	, 32127	
New Registered Office Address:		Ciţyı	, Florida (Zip C	ode)
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as vegist	tered agent. I am familiar w	ith and accept the obligat	ions of the position.	
	Signature of New Re	gistered Agent, if changin	ĥ.	
Check if applicable ☐ The amendment(s) is/are being filed p	oursuant to s. 607.0120 (11) (e), F.S.		

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)

Example:

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	P	Abigail Moore	765 taylor Rd Port Orange Fl
Add			32127
Remove	V	Abigail Moore	765 taylor Rd Port Orange Fl
2) Change Add			32127
Remove 3) <u>x </u>	v	Kate Moore	765 taylor Rd Port Orange FI
Add		-	32127
Remove 4) Change	Р	Kate Moore	765 taylor Rd Port Orange Fl
x Add			32127
Remove 5) X Change	Mem	DeAnna Greenwood	765 taylor Rd Port Orange Fl
Add			32127
Remove 6) Change	S	DcAnna Greenwood	765 taylor Rd Port Orange Fl
x Add			32127
Remove			

Attach additional sheets, if n	tecessary). (Be spe		,			
		٨	1/A			
			/			
			.			
						
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<u> </u>						
an amendment provides	for an exchange, re	elassification	or cancellatio	n of issued sha	res,	
<u>provisions for implementi</u>	ing the amendment	<u>if not contain</u>	ed in the amen	<u>dment itself:</u>		
(if not applicable, indic	cate N/A)					
	N/A					
						
						
			· · · · · · · · · · · · · · · · · · ·			

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The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :	9/21/2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bloc document's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this dantment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without shareholder action	on and shareholder
☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes cast for the amendment(cient for approval.	s)
	ved by the shareholders through voting groups. The following statements of voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected, l appointed	etor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other count fiduciary by that fiduciary) eAnna Greenwood	-t
- -	(Typed or printed name of person signing)	
Su	ecretary	

(Title of person signing)