P13000059245

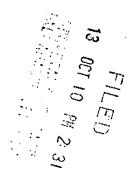
(Re	equestor's Name)			
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Por Chris

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COVER LETTER

TO: Amendment Section Division of Corporations CLASSIX REALTY & SURVEYING INC. NAME OF CORPORATION: P13000059245 DOCUMENT NUMBER: _ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CHARLES L. HOLLINGSWORTH Name of Contact Person Firm/ Company 16145 SW 110 AVENUE Address MIAMI FLORIDA 33157 City/ State and Zip Code hollingsworth.charles@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CHARLES L. HOLLINGSWORTH 305 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

> **Mailing Address** 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 Articles of Incorporation

CLASSIX REALTY & SURVEYINGGINC..
as currently filed with the Florida Dept. of State)

(Name of Corporation as	currently filed with the Florida De	ot. of State)		
	P13000059245	•		
(Documer	at Number of Corporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this <i>Florida Pr</i>	cofit Corporation add	opts the following ar	nendment(s) to
A. If amending name, enter the new na	me of the corporation:			
	CLASSIX REALTY & INVESTME	INT INC.	Th	ie new
name must be distinguishable and con: "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co". A p	pany," or "incorpor rofessional corporat	ated" or the abbro ion name must con	eviation tain the
B. Enter new principal office address,	if applicable:			ŧ
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)		~ : 7)	•
				<u> </u>
				; ; ;
C. Enter new mailing address, if appli	cable:			
(Mailing address MAY BE A POST (O

·				
D. If amending the registered agent an	d/or registered office address in Flor	rida, enter the name	of the	
new registered agent and/or the new	registered office address:			
Name of New Registered Agent	MAJOIRE TARVER			
	10850 SW 158 LN, MIAMI F	L 33157		
	(Florida street address)			
New Registered Office Address:		, Florida_		
	(City)		(Zip Code)	
New Registered Agent's Signature, if ch	nanging Registered Agent:	and the se		
l hereby accept the appointment as registe	aea ageni i amqamiiiar with and ac	cepi ine obligations i	oj the position.	

Page 1 of 4

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:

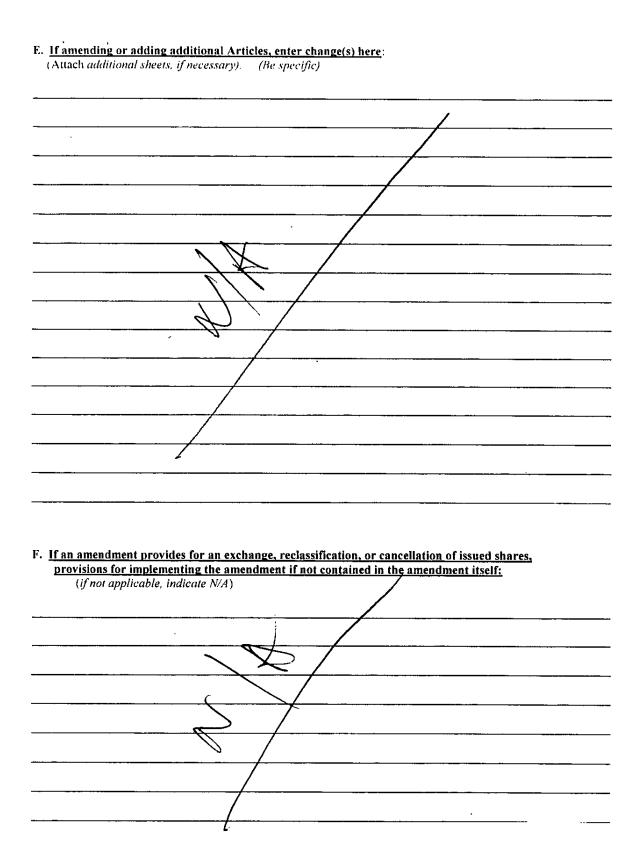
(Attach additional sheets, if necessary)

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 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>PT</u>	John Doe			
X Remove	<u>v</u>	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s		
I) X Change	<u>PT</u>	CHARLES HOLLINGSWORTH	18710 SW 107 AVE # 11		
_X Add	SV	MARJOIRE TARVER	18710 SW 107 AVE # 11		
X Remove	٧	DONAVAN LEWIS	18710 SW 107 AVE # 11 CUTLER BAY, FL 33157		
2) Change					
Add					
Remove					
3) Change	-,				
Add					
Remove			/		
4) Change	 _				
Add	•				
Remove					
5) Change					
Add					
Remove					
6) Change	_/				
Add					
Remove					



The date of each amendment	s) adoption:	OCTOBER 8thil 2013#	, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :	(FOCTOBER) 10社的総理20	013	
	(no more t	than 90 days after amendment file date)	•
Adoption of Amendment(s)	(<u>CHECK ONE</u>))	
☐ The amendment(s) was/were by the shareholders was/we		s. The number of votes cast for the amendment(s)	
		ers through voting groups. The following statement led to vote separately on the amendment(s):	
"The number of votes	cast for the amendment(s) wa	ras/were sufficient for approval	
by		, n	
•	(voting group)		,
The amendment(s) was/were action was not required.	e adopted by the board of dire	ectors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporator	rs without shareholder action and shareholder	
	TOBER 08th, 2013		
Signature <u> </u>		er officer – it directors or officers have not been	
		if in the hands of a receiver, trustee, or other court	
ар	pointed fiduciary by that fidu	uciary)	
		HOLLINGSWORTH	
	(Type	ed or printed name of person signing)	
	PRESIDEN	NT/TREASURER	
		(Title of person signing)	