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SECRETARY OF STATE

C. GOLDEN

JUL - 6 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Sunrise NW Florid	da Farms, Inc.				
DOCUMENT NUMB	ER: P13000062138					
	of Amendment and fee are sul	bmitted for filing.				
Please return all corres	pondence concerning this mat	ter to the following:				
ı	Cynthia Willis					
-	Name of Contact Person					
:	Sunrise NW Florida Farms, Inc.					
-	Firm/ Company					
	P.O. Box 95; 5223 Palamino Lane					
-	Address					
,	Greenwood, FL 32443					
-		City/ State and Zip Cod-	e			
cindy	willis305@gmail.com					
		ed for future annual report	notification)			
For further information	concerning this matter, pleas	e call:				
Cynthia Willis		at ( <u>352</u>	210-3279			
Name o	f Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made p	nayable to the Florida Depa	irtment 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)			
Amer	ing Address idment Section ion of Corporations	Amend	Address Iment Section on of Corporations			
P.O.	Box 6327 hassee, F1, 32314	Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## FILED

2018 JUL -2 PM 12: 13

(Name of Corporation as curren	tly filed with the Florida Dept. of State LAHASSEE, FLOR
Sunrise NW Florida Farms, Inc. P13000062138	TALLAHASSEL, FLUK
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation: Clear Choice Realty Group, Inc.	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	N/A
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office address registered agent and/or the new registered office address	
Name of New Registered Agent	
tFlorida s	treet address)
New Registered Office Address:	(City) . Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agen hereby accept the appointment as registered agent. I am familiar	
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.

X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove	$\underline{V}$	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	nith		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
I + Change		_	N/A		
Add					
Remove					
2) Change		_		-	
Add					
Remove					
3 ) Change		_		<del>.</del>	
Add					
Remove					
4) Change		_			
Add					
Remove					
.5) Change					
Add					
Remove					
e en					
6) Change					
Add					
Remove					

F. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
N/A	

	06/28/2018	
The date of each amendment(s) ac		, if other than the
date this document was signed.		
U7/0 Effective date <u>if applicable</u> :	1/2018	
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date wpartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) efficient for approval.	
	roved by the shareholders through voting groups. The following statement 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	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
06/28/2018 Dated	3	
Signature	millia Wilt / parid t)	
selected	rector, president or other officer – if directors or officers have not been i, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Cynthia Willis	
	(Typed or printed name of person signing)	<del></del>
	President	
	(Title of person signing)	