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| (Ře | equestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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2015 MAY 26 AM 1: 40 SECRETARY OF STATE MAIN AMASSEE, FLORIDA

JUN 02 2014 C. CARROTHERS

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May 19, 2015

AMY ROSE FLORIDA WATERFRONT REALTY LLC 1085 ATLANTIC BLVD. #21 ATLANTIC BEACH, FL 32233

SUBJECT: FLORIDA WATERFRONT REALTY, INC.

Ref. Number: P13000066879

We have received your document for FLORIDA WATERFRONT REALTY, INC. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$10.00. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The attached form must be completed in order to file the document.

THE FORM YOU SUBMITTED IS FOR A LLC.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Cathy A Carrothers Regulatory Specialist

Letter Number: 715A00010477

COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: Florida Waterfron | t Realty, Inc. | |
|---|--|--|
| DOCUMENT NUMBER: P13000066879 | | · · · |
| The enclosed Articles of Amendment and fee are se | ubmitted for filing | |
| Please return all correspondence concerning this ma | atter to the following: | |
| Amy Rose | | |
| | Name of Contact Person | 1 |
| Florida Waterfront Realty, Is | nc. | |
| | Firm/ Company | |
| 1085 Atlantic Blvd Apt 21 | , , | |
| | Address | |
| Atlantic Beach FL 32233 | | |
| | City/ State and Zip Code | <u> </u> |
| amy@flwaterfrontrealty.com | | |
| · · | used for future annual report | notification) |
| · | · | , |
| For further information concerning this matter, plea | ase call: | |
| Amy Rose | 904 at (| 451-2593 de & Daytime Telephone Number |
| Name of Contact Person | Area Coo | de & Daytime Telephone Number |
| Enclosed is a check for the following amount made | payable to the Florida Depa | rtment of State: |
| \$35 Filing Fee \$Certificate of Status \$10 En WSE \$ | □\$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 | Amend Divisio Clifton | Address ment Section n of Corporations Building xecutive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Florida Waterfront Realty, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P13000066879 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment its Articles of Incorporation: A. If amending name, enter the new name of the corporation: n/a name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | Address |
| 1) Change | PD | Amy Rose | 1085 Atlantic Blvd #21 |
| Add X Remove | | | Atlantic Beach FL 32233 |
| 2) Change | P | Brian Rose | 1085 Atlantic Blvd #21 |
| X Add | | | Atlantic Beach FL 32233 |
| Remove | | | |
| 3) Change | D | Maria Camila Murata | 8430 Nadmar Ave |
| X Add | | _ | Boca Raton FL 33434 |
| Remove | | | |
| 4) Change | | | |
| 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) KRAKBANARWASAMARWANARWASAMARWANARWASAMARWASAMARWASAMARWANARWASAMARWASAMARWANARWASAMARWANARWANARWANARWANARWANARWANARWANARW | | |
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| 3. 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) Na | | |
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| The date of each amendment(s) | n/a adoption:, if other ti |
|---|---|
| date this document was signed. | , 17 01101 |
| n/ | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) |
| Note: If the date inserted in this document's effective date on the l | block does not meet the applicable statutory filing requirements, this date will not be listed Department of State's records. |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) |
| ☐ The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval. |
| | oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s): |
| "The number of votes ca | st for the amendment(s) was/were sufficient for approval |
| by | |
| | (voting group) |
| ☐ The amendment(s) was/were a action was not required. | dopted by the board of directors without shareholder action and shareholder |
| The amendment(s) was/were a action was not required. | dopted by the incorporators without shareholder action and shareholder |
| 5/28/15 Dated | |
| Signature <u>(</u> | rucikelarabap. |
| selec | director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee; or other court need fiduciary by that fiduciary) |
| | Maria Camila Murata |
| | (Typed or printed name of person signing) |
| | Director |
| | (Title of person signing) |