

Division of Corporations

**Florida Department of State**  
**Division of Corporations**  
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To: Division of Corporations  
 Fax Number : (850) 617-6360

From: Account Name : SERBER & ASSOCIATES, P.A.  
 Account Number : I200000000083  
 Phone : (305) 932-6262  
 Fax Number : (305) 933-9393

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: info@Serberlawfirm.com

**COR AMND/RESTATE/CORRECT OR O/D RESIGN**  
**EMMAP REAL ESTATE CORP.**

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Corporate Filing Menu

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STATE OF FLORIDA  
TALLAHASSEE, FL 32309

SCHOLDER

H: 90002783343

Articles of Amendment  
to  
Articles of Incorporation  
of

EMMAP REAL ESTATE CORP.

(Name of Corporation as currently filed with the Florida Dept. of State)

P13000068874

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

*The new 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:

(City)

Florida

(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*

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**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

**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)

SECRET STATE  
DEPARTMENT  
WASHINGTON, D.C. 20520

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H1900 2783363

The date of each amendment(s) adoption: September 17, 2019Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

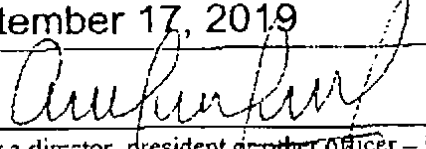
## Adoption of Amendment(s) (CHECK ONE)

☒ 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

by \_\_\_\_\_"  
(voting group)☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.Dated September 17, 2019

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)Adriana Grincwajg

(Typed or printed name of person signing)

Director

(Title of person signing)

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