P. 001

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H170001088123)))



H170001088123ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

	To:		
		Division of Corporations	
		Fax Number : (850)617-6380	
	From		
	. 45	Account Name : EXPRESS CORPORATE FILING SEPVICE INC.	~
05	, <u>, , , , , , , , , , , , , , , , , , </u>	Account Number: I20000000146	730
29	i 병문문	Phone : (305)444-4994 <u>€ 6</u>	APR2
:		Fax Number : (305)444-4977	2 – 4
E .	***	S T	6
A	i de grigo.	AN LIVE TO THE PROPERTY OF THE	با هـ
	<u>in the state</u>	r the email address for this business entity to be used for futi	urec 🗀
200] :: (i, j, z	innual report mailings. Enter only one Emoil address please.**;	-F: -
CC	I 沒盡多 E	mail Address:	07
	· 급조교	\$. The state of t	. –

COR AMND/RESTATE/COK-CECT OR O/D RESIGN S.D.C. INVESTWIFNT GROUP INC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

NC

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

	ion as currently filed with the Florida Dept, of State)
P13000078501	
(Docum	ment Number of Corporation (if known)
cursuant to the provisions of section 607,1006, Florid ts Articles of Incorporation:	la Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the c	orporation:
FIRST NATIONS REALTY, INC.	The new
ame must be distinguishable and contain the wor Corp.," "Inc.," or Co.," or the designation "Corp vord "chartered," "professional association," or the	rd "corporation," "company," or "incorporated" or the abbreviation o, "Inc," or "Co". A professional corporation name must contain the abbreviation "PA."
i. <u>Enter new principal office address, if applicable</u> Principal office address <u>MUST BE A STREET AD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	220
	20 3
	SSE
 If amending the registered agent and/or registered new registered agent and/or the new registered 	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
Name of New Regulered Agent	9
	(Florida street address)
	·
New Registered Office Address:	. Florida

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	PT	John Do	<u>>ē</u>		
X Remove	Ā	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sp	nith		
Type of Action (Check One)	Title		<u>Name</u>		Address
1) Change		_		· 	
Add					
Remove					
2)Change		_			
Add					·
Remove					
3) Change		_			
Add					
Remove					
4) Change		_			***
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_		<u> </u>	
Add					
Remove					

•	f necessary).	(Be specific)	
			
· · · · · ·	 		
			_

	.,		_
· · · · · · · · · · · · · · · · · · ·			
f an amendment neovida	s for an excha	inge, reclassification, or cancellation of issued shares,	
y wir amendiment broking	ting the amend	dment if not contained in the amendment itself:	
provisions for implement	Seate N/A		
provisions for implement (if not applicable, ind	licate N/A)		
provisions for implement	licate N/A)		
provisions for implement	licate N/A)		
provisions for implement	licate N/A)		
provisions for implement	licate N/A)		1
provisions for implement	licate N/A)		1
provisions for implement	licate N/A)		
provisions for implement	licate N/A)		
provisions for implement	licate N/A)		
provisions for implement	licate N/A)		• • • • • • • • • • • • • • • • • • • •

mn . 3. a	04/18/2017	
date this document	\' \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	if other than the
Effective date if ap	policable:	
	(no more than 90 days after amendment file date)	
	inserted in this block does not meet the applicable statutory filing requirements, this date will not be date on the Department of State's records.	t be listed as the
Adoption of Amen	adment(s) (CHECK ONE)	
	i(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) ders was/were sufficient for approval.	
	(s) was/were approved by the shareholders through voting groups. The following statement tely provided for each voting group entitled to vote separately on the amendment(s):	
	ber of votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not re		
LJ The amendment((s) was/were adopted by the incorporators without shareholder action and shareholder equired.	
D	Dated	
Si	ignaturo Madelein Viera	
	(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)	
	MADELEIN VIERA	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	