P130000082749

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Alexan	ndra Fernandez Dupille P	Α				
DOCUMENT NUMBER: P13000082						
The enclosed Articles of Amendment an	nd fee are submitted for fi	ling.				
Please return all correspondence concern	ning this matter to the foll	owing:				
Alexandra Fernar	ndez Dupille					
	Name of C	Contact Person				
Alexandra Fernar	Alexandra Fernandez Dupille PA					
	Firm/	Company				
5099 NW 7th St,	5099 NW 7th St, #1104					
	Address					
Miami, FL 33126	5					
	City/ State	and Zip Code				
alexandra.dupille@gma	ail.com					
E-mail addre	ess: (to be used for future	annual report no	otification)			
For further information concerning this r	matter, please call:					
Alexandra Fernandez Dupille	at	(305	842 6639			
Name of Contact Person		Area Code	& Daytime Telephone Number			
Enclosed is a check for the following am	nount made payable to the	Florida Departi	ment of State:			
□ \$35 Filing Fee □\$43.75 Fili Certificate	of Status Certified	Copy al copy is	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314		Division Clifton B	ent Section of Corporations			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Alexandra Fernandez Dupille, PA (Name of Corporation as currently filed with the Florida Dept. of State) P13000082749 (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: AD International Realty, Inc. 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." N/A B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) C. Enter new mailing address, if applicable: N/A (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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	ones	
<u>X</u> Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	Title		Name	Address
1)Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				4
Remove				

	(Be specific)
'A	
	4.
If an amendment provides for an eych	ange reclassification or cancellation of issued chares
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A) A	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A)	

date this document was signed.	doption:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	e will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	ı
	proved by the shareholders through voting groups. The following statemer each voting group entitled to vote separately on the amendment(s):	nt .
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
Ъу	17	
	(voting group)	
The amendment(s) was/were ado action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated O	3/20/2017	
Gi-mat		
selected	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	ALEXANDRA FERNANDEZ DUPILLE (Typed or printed name of person signing)	
	DIRECTOR /OWNER (Title of person signing)	