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R Van

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: REAL ESTATE	BUSINESS L&L CORP	
DOCUMENT NUM	IBER: P13000099602		
The enclosed Article	s of Amendment and fee are s	ubmitted for filing.	
Please return all corr	espondence concerning this m	atter to the following:	
	NINOTCHKA HECHT		
	JUST HIGH TECH CORP	Name of Contact Person	·
		Firm/ Company	
	10544 NW 26TH ST. SUIT	E E-204	
	DORAL FL 33172	Address	
		City/ State and Zip Code	<u> </u>
		Said and 15th Ovac	•
asist	entemiami@gmail.com	!	
	E-mail address: (to be i	used for future annual report	notification)
For further information	on concerning this matter, ple	ase call:	
NINOTCHKA HEC	нт	at (⁷⁸⁶	762-2048
Name	of Contact Person	Area Coc	le & Daytime Telephone Number
Enclosed is a check f	or the following amount made	 	rtment of State:
■ \$35 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)
An Div P.C	ailing Address endment Section vision of Corporations D. Box 6327 llahassee, FL 32314	Amendi Division Clifton 2661 Er	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

17 SEP -5 AM 9: 25

REAL ESTATE BUSINESS L&L CORP	THE ALL SHEET FREE TO A
(Name of Corporation	as currently filed with the Florida Dept. of State)
P13000099602	
(Documer	nt Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation:	statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	ooration:
N/A	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDR	<u>ESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered new registered agent and/or the new registered of	
	ince address.
Name of New Registered Agent N/A	
	(Florida street address)
New Registered Office Address:	. Florida
New Negisterea Office Address.	(City) (Zip Code)
New Registered Agent's Signature, if changing Regist	
I hereby accept the appointment as registered agent. I a	um familiar with and accept the obligations of the position.
Signati	ure of New Registered Agent, if changing

address of each Offic (Attach additional she Please note the officer P = President; V= Vi Executive Officer: CF held. President, Treast Changes should be no a change, Mike Jones Mike Jones, V as Rema	er and/or I ets, if neces /director til ce Presiden (O = Chief arer, Direct ted in the fo	Director being a sary) tle by the first let ut; T= Treasurer Financial Office tor would be PT to both to sale corporation, Sale	dded:	officer/director being removed and title, name, and TR= Trustee; C = Chairman or Clerk; CEO = Chief more than one title, list the first letter of each office as the PST and Mike Jones is listed as the V. There is These should be noted as John Doe, PT as a Change,
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)	Title	<u>Nam</u>	 <u>e</u> 	Address
1) Change	PT	ZEL	li HIDETH MONTAÑO II	11663 NW 87th Ln
Add				DORAL FL 33178
X Remove				
2) Change	РТ	DON	 MENICO TABONE 	11663 NW 87th Ln
X Add				DORAL FL 33178
Remove				
3) Change				_
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		<u> </u>		
Add				
Remove				
6) Change				
Add				

__ Remove

li li	
E. If amending or adding additional Articles, et (Attach additional sheets, if necessary). (Bets	nter change(s) here: pecific)
N/A	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
1	
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C. If an amandment manides for an auch and	
provisions for implementing the amendmen	reclassification, or cancellation of issued shaves, tif not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
	ĮI.
	li .

07/01	2017 if other than the
The date of each amendment(s) adoption:date this document was signed.	
Effective date if applicable:	o more than 90 days after amendment file date)
	neet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHEC	K ONE)
The amendment(s) was/were adopted by the sha by the shareholders was/were sufficient for app	reholders. The number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the si must be separately provided for each voting gr	preholders through voting groups. The following statement outpentitled to vote separately on the amendment(s):
"The number of votes east for the amenda	tem(s) was/were sufficient for approval
by	 (group)
	and of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incaction was not required.	orporators without shareholder action and shareholder
07/01/2017 Dated	
Signatur & Fifth	
(By a Minister preside	nt or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other court that fiduciary)
ZELHIDETH	IONTAÑO
(T)	ped or printed name of person signing)
PRESIDENT	TREASURE
	(Title of person signing)

. . . .