(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	·
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'JAN 27 2014 T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

Division of Corporations			
NAME OF CORPORATION: MIAMI MY DOCUMENT NUMBER: P13000101	Y HOME REA 607	LTY INC.	
The enclosed Articles of Amendment and fee are su			
Please return all correspondence concerning this ma	atter to the following:		
LUDMILA BOO	SATOV		
MIAMI MY HO	Name of Contact Person		
18090 COLLIN	Firm/Company	E T15	
SUNNY ISLES	Address BEACH FL 3	3160	
	City/ State and Zip Cod	e	
lbogatov@yahoo.	com		
	sed for future annual report	notification)	
		,	
For further information concerning this matter, plea	se call:		
Ludmila Bogatov	_{at (} 305	331-7922	
Name of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 Filing Fee	□\$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	Street	Address	
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		
i alialia3500, i L 32317	2001 1	ACCULTO COMO! CHOIC	

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



14 JAH 21 PH 2: 35

MIAMI MY HOME REALTY 7

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

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nent(s) to

P13000101607				
(Document Number of Co	orporation (if k	mown)		
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this <i>FI</i>	orida Profit Corpo	<i>ration</i> ado	pts the following amendm
A. If amending name, enter the new name of the corp	oration:			
name must be distinguishable and contain the word "Corp.," "Inc.," or Co" or the designation "Corp," word "chartered," "professional association," or the above	"Inc," or "Co	o". A professional		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u>ESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	fice address:			of the
Name of New Registered Agent				
	(Florida stree	1 address)		
New Registered Office Address:	(City)		, Florida	(Zip Code)
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a	ım familiar wil	-	bligations (of the position.
Signature of New	Revistered Av	ent, 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	С	Ludmila Bogatov	18090 Collins Ave. T15		
Add			Sunny Isles Beach FL		
Remove			33160		
2) Change	D	Belkys Miranda	18090 Collins Ave.		
Add			Suite T15		
Remove			Sunny Isles Beach		
3) Change			FL 33160		
Add					
Remove					
4) Change			-		
Add Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove			_		

Attacl	ending or adding addition In additional sheets, if nece	ssary). (Be specif	(ic)		
	···				
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			.		· · · · · · · · · · · · · · · · · · ·
prov	amendment provides for issions for implementing (if not applicable, indicate	the amendment if n	ssification, or can not contained in th	cellation of issued s te amendment itself:	hares,
					
					
					-

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective 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 01/16/2014	
Signature (Hy 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)	
Ludmila Bogatov	
(Typed or printed name of person signing)	_
Chairman	
(Title of person signing)	