(Re	equestor's Name)			
(Ac	ldress)			
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COVER LETTER

TO: Amendment Section

Division of Corporations	
NAME OF CORPORATION: LOCAUZ	Realty & Associates Inc
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are sub-	bmitted for filing.
Please return all correspondence concerning this mat	tter to the following:
latri	icia figueroa
LaCruz	Name of Contact Person Kea Hy & Associates Time Firm/Company
16069 r	old Ash Loop
<u>Orla</u>	Address NOV FL 30808 City/ State and Zip Code
E-mail address: (1	alty trish a mail (OM to be used for future annual report notification)
For further information concerning this matter, please	e call:
Name of Contact Person	at (<u>401</u>) <u>575-38/3</u> Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
\$35 Filing Fee S43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment FILED Articles of Incorporation (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this 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: Florida 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.

Example: X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	<u>te Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		Luis Gutierrez	Heola Old Ath Lap
Add			Dilando, FL 30828
Remove			
2) Change		Wilfredo Figueroa	Meda Old Ash Loop Drlando, FL 30828
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			****
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sh	g additional Articles, enter change(s) here: eets, if necessary). (Be specific)	
•		
		
1 0 100010		
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If an amendment prov	ides for an exchange, reclassification, or canc	ellation of issued shares,
(if not applicable,	enting the amendment if not contained in the	amendment itself:
(ij noi applicable,	nature WA)	
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The date of each amendment(s) adoption:	, if other than the
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	
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)	
appointed indiciary by that indiciary)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	