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

TO: Amendment Section Division of Corporations NAME OF CORPORATION: C.A.J. REAL ESTATE, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Carlos A. Triay, Esquire Name of Contact Person Carlos A. Triay P.A. Firm/ Company 2301 NW 87 Avenue #501 Address Miami, FL 33172 City/ State and Zip Code cattriay@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carlos A. Triay at (305) 597-8944

Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, Fl. 32314

Articles of Amendment to Articles of Incorporation of

C.A.J. REAL ESTATE, INC.		
(Name of Corporation as	currently filed with the Florida Dept.	of State)
P14000004673		
(Document No	umber of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	ates, this <i>Florida Profit Corporation</i> ado	epts the following amendment(s) to
A. If amending name, enter the new name of the corpora	<u>ition:</u>	
		The new
name must be distinguishable and contain the word "con" "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc. word "chartered," "professional association," or the abbrev	c," or "Co". A professional corporati	ated" or the abbreviation
B. Enter new principal office address, if applicable:		
(Principal office address <u>MUST BE A STREET ADDRESS</u>	Σ)	3
		APR TO
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	, , , , , , , , , , , , , , , , , , , 	
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D. If amending the registered agent and/or registered off		of the
new registered agent and/or the new registered office	address:	
Name of New Registered Agent		
(F	horida street address)	
New Registered Office Address:	,1	Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am fi	g Agent: Samiliar with and accept the obligations	of the position.
	,	•
Simetura	of New Remistered Agent of 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 us an Add.

Example: X Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	Address		
1) Change	V/ľ	Guillermo Cancio Bello	2301 NW 87 Avenue #501		
X Add	<u> </u>		Miami, FL 33172		
Remove					
2) Change					
Add					
Remove					
3) Change	***				
Add					
Remove					
4) Change					
Add					
Remove					
5) Change	ş				
Add					
Remove					
6) Change	**		<u> </u>		
Add			·····		
Remove					

f amending or adding additi Attach additional sheets, if nee	cessary). (Be specif	ic)		
				<u></u>
		<u> </u>		
If an amendment provides for provisions for implementing (if not applicable, indica	g the amendment if n	essification, or canc not contained in the	ellation of issued sha amendment itself:	ires,
				6.1 (AMAZINE)

The date of each amendment(s) ad	pption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date with artment of State's records.	Il not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	nted by the shareholders. The number of votes cast for the amendment(s) licient for approval.	
☐ The amendment(s) was/were appropriately provided for a	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes east f	or the amendment(s) was/were sufficient for approval	
by	<u></u>	
-	(voting group)	
The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoption was not required.	nted by the incorporators without shareholder action and shareholder	
DatedSignature	Du fa Bollo	
	ector, president of other officer - if directors or officers have not been	
	hy an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	luan Cancio Bello	
-	(Typed or printed name of person signing)	
	President	
•	(Title of person signing)	