## P14000004673

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: C.A.J. REAL EST	ATE, INC.	
DOCUMENT NUM	D1.100000.1673	•	
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Carlos A. Triay		
		Name of Contact Person	1
	Carlos A. Triay PA		
		Firm/ Company	<del>_</del>
	2301 NW 87 Avenue #501		
		Address	<u>.</u>
	Miami, FL 33172		
	····	City/ State and Zip Cod	e
cat@	eattriay.com		
		sed for future annual report	notification)
For further information	on concerning this matter, pleas میرسید	se call:	
Carlos A. Triay		305 at (305	597-8944
Kame	of Contact Person	/ Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□S43.75 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	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FI. 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

C.A.J. REAL ESTATE, INC.

(Name of Corporation as current)	ly filed with the Florida Dept, of State)	
P1400004673	,	
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following am	ıendn
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or " word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must con-	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		
		20
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		ص. 10.0
		5
		<del>;</del>
		<u>-</u>
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		<u> </u>
Name of New Registered Agent	- ?	
Name of New Negisterea Agem		
(Florida str	reet address)	
New Registered Office Address:	, Florida	
	(City) (Zip Code	7
New Registered Agent's Signature, if changing Registered Agent Thereby accept the appointment as registered agent. I am familiar v		
т петелу ассері іне арротитеті ах гедіметей адеті. Тат затінағ	with and accept the obligations of the position,	
Signature of New F	Registered Agent, if changing	
·		1

nddress of each Office Attach additional sheet Please note the officer/a P = President; V= Vice Executive Officer; CFO held, President, Treasur Thanges should be note I change, Mike Jones le	r and/or D s, if necess lirector title President = Chief i rer, Directe d in the fo	sary)  It by the first letter of the office title;  It; T= Treasurer; S= Secretary; D= Director,  Financial Officer. If an officer/director hold,  or would be PTD.  Ilowing manner. Currently John Doe is listed	TR= Trustee; C = Chairman or Clerk; CEC is more than one title, list the first letter of ect as the PST and Mike Jones is listed as the V. These should be noted as John Doe, PT as a
XChange	<u>PT</u>	John Doe	
$\underline{X}$ Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P/S	Juan Cancio Bello	2301 NW 87 Avenue #501
Add			Miami, FL 33172
X Remove			
2) Change	V/T	Guillermo Cancio Bello	2301 NW 87 Avenue #501
Add			Miami, FL 33172
X Remove			
3) Change	P/S	Aida M. Uribe	2301 NW 87 Avenue #501
X Add			Miami, FL 33172
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

\_ Remove

Hamending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	-
	-
<del></del>	
	i
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
	j
	_ <del></del>

The date of each amendment(s) adoption: QQT19	if other
Effective date <u>if applicable</u> :	<u> </u>
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be list
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
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.	
September 27, 2019 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)	
AIDA M. UROBE	<u> </u>
(Typed or printed name of person signing)  Posidud	
(Title of person signing)	+