## P1400011675

| (Re                     | equestor's Name)     | <del></del> |
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| (Cit                    | ty/State/Zip/Phone i | #)          |
| PICK-UP                 | ☐ WAIT               | MAIL        |
| (Bu                     | isiness Entity Name  | e)          |
| (Do                     | ocument Number)      |             |
| Certified Copies        | _ Certificates o     | of Status   |
| Special Instructions to | Filing Officer:      |             |
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SECRETARY OF STATE
TALLAMASSEE, FLORIDA

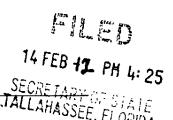
FEB 1 3 2014 C. CARROTHERS

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: CAPITAL REAL ESTATE SOLUTIONS, INC  |   |   |  |  |  |
|--|---|---|--|--|--|
| DOCUMENT NUMBER: P14000011675  |   |   |  |  |  |
|  | of Amendment and fee are su                 |   |  |  |  |
| Please return all correspondence concerning this matter to the following:                      |   |   |  |  |  |
| LUIS DANILO ALEMAN   |   |   |  |  |  |
| Name of Contact Person CAPITAL REAL ESTATE SOLUTIONS, INC                                      |   |   |  |  |  |
| Firm/ Company 1840 W 49 ST SUITE 713   |   |   |  |  |  |
|  | HIALEAH, FL 33012                           |   |  |  |  |
|  |   | City/ State and Zip Code  |  |  |  |
| info   | o@capitalresolutio                          |   |  |  |  |
|  | E-mail address; (to be us                   | sed for future annual report  | notification)  |  |  |
| For further information  | on concerning this matter, pleas            | se call:  |  |  |  |
| LUIS DANILO ALEMAN   |   |   |  |  |  |
| Name   | of Contact Person                           | Area Co   | de & Daytime Telephone Number  |  |  |
| Enclosed is a check for the following amount made payable to the Florida Department 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) |  |  |
| 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** Articles of Incorporation



## CAPITAL REAL ESTATE SOLUTIONS, INC

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

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|-----|---|---|----|----|----|----|----|
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(Document Number of Corporation (if known)

nt(s) to

| ame must be distinguishable and contain the word "co<br>Corp.," "Inc.," or Co.," or the designation "Corp," "It<br>ord "chartered," "professional association," or the abbre | nc," or "Co". A professional corporation name must   |
|--|--|
| Enter new principal office address, if applicable:   | 1840 W 49 ST SUITE 713   |
| incipal office address MUST BE A STREET ADDRES.  | HIALEAH, FL 33012  |
| Enter new mailing address, if applicable:  | 1840 W 49 ST SUITE 713   |
| (Mailing address MAY RF A POST OFFICE ROX)   | 1040 11 40 01 001111110  |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u> )   | HIALEAH, FL 33012  |
|  | HIALEAH, FL 33012  |
| If amending the registered agent and/or registered of  | HIALEAH, FL 33012  Tice address in Florida, enter the name of the  |
| If amending the registered agent and/or registered of<br>new registered agent and/or the new registered office<br>NI/A   | HIALEAH, FL 33012  Tice address in Florida, enter the name of the  |
| Name of New Registered Agent   | HIALEAH, FL 33012  Tice address in Florida, enter the name of the  |
| If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent 1840 W 49                           | HIALEAH, FL 33012  Tice address in Florida, enter the name of the address:   |
| If amending the registered agent and/or registered of new registered agent and/or the new registered office Name of New Registered Agent 1840 W 49                           | HIALEAH, FL 33012  Tice address in Florida, enter the name of the eaddress:  9 ST SUITE 713  Florida street address) |

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) | Title     | Name        | <u>Addres</u> s |  |  |
| 1) Change                  |           |             |                 |  |  |
| Add Remove                 |           |             |                 |  |  |
| 2) Change                  |           |             |                 |  |  |
| Add                        |           |             |                 |  |  |
| Remove                     |           |             |                 |  |  |
| 3) Change                  |           |             |                 |  |  |
| Remove                     |           |             |                 |  |  |
| 4) Change                  |           |             | <del> </del>    |  |  |
| Add<br>Remove              |           |             |                 |  |  |
| []                         |           |             | <del></del>     |  |  |
| 5) Change                  |           |             |                 |  |  |
| Remove                     |           |             |                 |  |  |
| 6) Change                  |           |             |                 |  |  |
| Add                        |           |             |                 |  |  |

| F. 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/4) | E. If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)   |
|--|--|
| provisions for implementing the amendment if not contained in the amendment itself:  | FEI/EIN NUMBER IS 46-4769638   |
| provisions for implementing the amendment if not contained in the amendment itself:  |  |
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| The date of each amendment(s) a                              | dention: 210114   | . If other than th          |
|--|---|-----------------------------|
| date this document was signed.                               | . •   | 14 FFD 🚗                    |
| Effective date if applicable:                                |   | SECRETARY 4. 25             |
|  | (no more than 90 days after amendmen  | I FILE TALLAHASSEE, FLORIDA |
| Adoption of Amendment(s)                                     | ( <u>CHECK ONE</u> )  |                             |
| The amendment(s) was/were ad by the shareholders was/were so | opted by the shareholders. The number of votes cast for afficient for approval.   | or the amendment(s)         |
|  | proved by the shareholders through voting groups. <i>The each voting group entitled to vote separately on the a</i>                                     |                             |
| "The number of votes case                                    | for the amendment(s) was/were sufficient for approva  | ıl                          |
| by   | (voting group)  | .,,<br>                     |
|  | (voting group)  |                             |
| The amendment(s) was/were ad action was not required.        | opted by the board of directors without shareholder ac  | tion and shareholder        |
| The amendment(s) was/were ad action was not required.        | opted by the incorporators without shareholder action   | and shareholder             |
| Dated 2/10/20  | 14  |                             |
| Signature  |   |                             |
| (By a c  | director, president or other officer – if directors or officed, by an incorporator – if in the hands of a receiver, trated fiduciary by that fiduciary) |                             |
|  | LUIS D ALEMAN   |                             |
|  | (Typed or printed name of person s  | signing)                    |
|  | PRESIDENT   |                             |
|  | (Title of person signing)   |                             |