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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: TURNER REALTY ASSOCIATES, INC. DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **BRITTANY TURNER** Name of Contact Person Firm/ Company 9826 TREE TOPS LAKE ROAD Address TAMPA, FL 33626 City/ State and Zip Code LISTINGTAMPABAY@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **BRITTANY TURNER** at (813) 833-2520

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: **\$35** Filing Fee □\$43.75 Filing Fee & □\$43.75 Filling Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

is enclosed)

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Articles of Amendment

to

Articles of Incorporation

of

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

TURNER REALTY ASSOCIATES, INC.

P14000020567		<u> </u>
(Docum	nent Number of Corporation (if kn	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Corp</i>	poration adopts the following amendmen
A. If amending name, enter the new name of the co	orporation:	
BRITTANY TURNER, P.A.		The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp." "Inc, "chartered." "professional association," or the abbre	or "Co". A professional corp	rporated" or the abbreviation "Corp.,"
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered agent and/or register	red office uddress in Florida, ent	er the name of the
new registered agent and/or the new registered		er ene pame of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg		
I hereby accept the appointment as registered agent.	i am familiar with and accept the	obligations of the position.
Signo	uture of New Registered Agent, if c	hanging
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. €	607.0120 (11) (e). F.S.	

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 = Secretarly; 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.

X Change	<u>PT</u>	<u>John Do</u>	<u>e</u>	
X Remove	<u>V</u>	Mike Jos	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
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Remove 3) Change		_		
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4) Change	 	_	···	· · · · · · · · · · · · · · · · · · ·
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

f 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)	If amending or adding additional Attach additional sheets, if necessa	(re) (Re specific)	
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The date of each amendment(s) adoption:	, if other than the
Effective dute if applicable	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder ac action was not required.	tion and shareholder
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated 3 3 2000	
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 co	
appointed fiduciary by that fiduciary)	
Brittary When	
(Typed or printed name of person signing)	
<u> </u>	
(Title of person signing)	