P14000031430

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COVER LETTER

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TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Skyland Propert	ies Corp
DOCUMENT NUMBER: P14000031430	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this i	matter to the following:
Amnon Dabakaroff	
	Name of Contact Person
	Firm/ Company
5846 S. Flamingo Rd. #23	8
	Address
Cooper City, FL 33330	
	City/ State and Zip Code
amnond@skylandmg.com	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, pl	ease call:
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	le payable to the Florida Department of State:
\$35 Filing Fee \$\sum \text{Certificate of Status}\$	
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 to Articles of Incorporation of

SKYLAND PROPERTIES CORP.

(Name of Corporation as current	tly filed with the Florida Dept. of State)
P14000031430	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
. ,	N/A
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable:	N/A FIG. F T
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the
new registered agent and/or the new registered office addres	
Name of New Registered Agent //	7
(Florida si	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
20, 2000p appointment ab regionered agent. I am jaminar	seepp. me announced by 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> ·	John De	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	<u>ones</u>		
X Add	<u>sv</u>	Sally Si	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	V		Daniel Dabakaroff		5846 S. Flamingo Rd. #238
X Add					Cooper City, FL 33330
Remove					
2) Change	D	_	Isaac Dabakaroff		5846 S. Flamingo Rd. #238
X Add					Cooper City, FL 33330
Remove					
3) Change	<u>S</u>	_	Ariel Dabakaroff		5846 S. Flamingo Rd. #238
X Add					Cooper City, FL 33330
Remove	٠				
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change		_			
Add					
Ramaya					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
$\Delta I/H$	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
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/A)	
N/A	
	· .
\mathcal{N}/\mathcal{H}	

The date of each amendment(s) ad	03/22/2016 ontion:	, if other than th
date this document was signed.		, n other than the
Effective date <u>if applicable</u> :		
	(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 partment of State's records.	date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment ficient for approval.	nt(s)
	roved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast f	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopaction was not required.	oted by the board of directors without shareholder action and shareho	lder
action was not required.	oted by the incorporators without shareholder action and shareholder	
DatedSignature	non Dahand	
(By a di selected	rector, president or other officer – if directors or officers have not been an incorporator – if in the hands of a receiver, trustee, or other conditional distributions by that fiduciary)	
-	Annon Dabakaroff (Typed or printed name of person signing)	
	Prisident	

(Title of person signing)