## P14000046286

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PICK-UP WAIT MAIL
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TALLAHASSEE, FL

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## **COVER LETTER**

Division of Corporations
NAME OF CORPORATION: Tava F.M. Hames, Realtor, P. DOCUMENT NUMBER: P14000046286
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tara Hames  Name of Contact Person  Tara E. M. Hames, P.A.  Firm/ Company  1900 Saral Palm Dr # 307  Address  Davie Fr 33334  City/ State and Zip Code  + araeve 13 eamail.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Tara Hames at 954, 806-7214  Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)  \$43.75 Filing Fee & Certificate of Status  (Additional Copy is enclosed)  \$43.75 Filing Fee & Certificate of Status  (Additional Copy is enclosed)

## Mailing Address

TO: Amendment Section

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

Artic	cles of Amendment
Article	to es of Incorporation
Tara E.M. Hames	es of Incorporation of Currently filed with the Florida Dept. of State
P140000 41	6286 See 1
(Document N	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	mes P.A. The new
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	ntion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  D. If amending the registered agent and/or registered office	
Name of New Registered Agent	
	lorida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	d Agent: amiliar with and accept the obligations of the position.
Signature o	of New Registered Agent, if changing

to

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 = 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	PT	John Doe	
X Remove	<u>V</u> .	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	<del></del>		
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remova			

amending or adding additional Art	cles, enter change(s) here:	
ttach additional sheets, if necessary).	(Be specific)	
		<del></del>
		· · · · · · · · · · · · · · · · · · ·
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an amendment provides for an excl	ange, reclassification, or cancellation of issued	shares,
ovisions for implementing the ame	ndment if not contained in the amendment itse	<u>lf:</u>
(if not applicable, indicate N/A)		
		<del></del>

The date of each amendment(s) adoption:	if other than
Effective date 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 date will no document's effective date on the Department of State's records.	t be listed as
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and sha action was not required.	reholder
☐ 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)	
Dated 218127	
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)	
$T_{\alpha} = 0$	
jura tomo Hames	
(Typed or printed name of person signing)	
Drestor	
(Title of person signing)	<del></del>

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