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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORE	PORATION: Oceano Realty, Inc.	:				
DOCUMENT NU	D14000046805					
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.				
Please return all co	rrespondence concerning this ma	tter to the following:				
	Judy Mollica					
		Name of Contact Persor				
	Oceano Realty, Inc					
		Firm/ Company				
	4400 N Ocean Blvd, #4					
	Address					
	Gulf Stream, FL 33483					
		City/ State and Zip Code	3			
ju	dymollica@gmail.com					
_	E-mail address: (to be us	sed for future annual report	notification)			
For further informa	ntion concerning this matter, pleas	se call.				
Judy Mollica		at (	309-1656 de & Daytime Telephone Number			
Nai	ne of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check	k for the following amount made	payable to the Florida Depa	rtment 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		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Oceano Realty, Inc				
(Name of Corporation	on as currently	filed with the Florid	la Dept. of State)	<u> </u>
P14000046805				
(Docum	nent Number of C	Corporation (if know	1)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:  A. If amending pame, enter the new name of the co		orida Profit Corpor	ation adopts the follow	ving amendment(s) to
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the B. Enter new principal office address, if applicable	" "Inc," or "Coabbreviation "P.	o". A professional		
(Principal office address <u>MUST BE A STREET ADD</u>	ORESS )			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO)  D. If amending the registered agent and/or register new registered agent and/or the new registered.	<u>ed office addres</u>	s in Florida, enter	the name of the	
Name of New Registered Agent				
	(Florida street	t address)		
New Registered Office Address:			. Florida	
New Registered Office Address.	(C	ity)		ip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	<mark>istered Agent:</mark> I am familiar wii	th and accept the obt	igations of the position	<i>1</i> .
Sign	ature of New Res	gistered Agent, if cha	nging	<del></del>

## 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)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	ν	Barbara Heiss	1016 Kokomo Key Lane
Add X Remove			Delray Beach, FL 33483
2) Change	<u>v</u>	Judy Mollica	4400 N Ocean Blvd, #4
X Add			Gulf Stream, FL 33483
Remove			
3 ) Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
O CI			
6) Change		_	
Add			
Remove			

If amending or adding additional Art. Attach additional sheets, if necessary).	(Be specific)
_	
·····	
f an amendment provides for an excl provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
and the same	

The date of each amendment(s) adoption:	_, if other than the
Effective date if applicable:  (no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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)	
(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.	
5/12/2015 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)	_
AA	
(Typed or printed name of person signing)	
<b>∌</b> /	
(Title of person signing)	
( i the or belown all mile)	