## P1400048994

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: NORTH BEACH	I INTERNATIONAL REAL	LTY, INC.
DOCUMENT NUMBER: P14000048994		
The enclosed Articles of Amendment and fee are	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
MATTHEW L. BELL, CPA	A	
	Name of Contact Perso	en
HARDING BELL INTERN	ATIONAL, INC.	
	Firm/ Company	<u>-</u>
113 PONTOTOC PLAZA	<del> </del>	
	Address	
AUBURNDALE, FL 33823	l	
	City/ State and Zip Cod	c
ENISQOSJA@GMAIL.COM		
<u> </u>	ised for future annual report	notification)
( )		notification)
For further information concerning this matter, plea	ise call:	
MATTHEW L. BELL, CPA		
	at (	
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
S35 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	Street Address	
Amendment Section		ment Section
Division of Corporations	Divisio	n of Corporations
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

NORTH BEACH INTERNATIONAL REALTY, INC.

(Name of Corporation as currently	filed with the Florida Dept. of State)	
P14000048994		
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this $F$ its Articles of Incorporation:	lorida Profit Corporation adopts the following amend	dment(s) to
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 "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name must contain	
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u> )		<del>-</del>
		_
	ः द्	츎
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	-	SE T.
	<b>A</b> 5.	-0
D. If amending the registered agent and/or registered office addre- new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	- <b>s</b> : 08
Name of New Revistered Agent	3:*	C/-2
(Florida stree	t address)	
New Registered Office Address:	, Florida	_
(0	City) (Lip Code)	
New Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.	
Signature of New Reg	gistered 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	PT	John Doe		
X Remove	¥	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	Name	<u>Addres</u> s	
1) Change	VP	BRANNON OGBURN	241 RIVERSIDE DRIVE	
Add			#608	
X Remove			HOLLY HILL, FL 32117	
2) Change	<del></del>		<u> </u>	
Add				
Remove				
3)Change				
Add				
Remove				
4) Change			<del>-</del>	
Add				
Remove				
5) Change				
Add				
Remove				
6) Change			_	
Add				
Remove				

- "	icles, enter change(s) here: (Be specific)
<del></del>	
	<u> </u>
<del></del>	
· · · · · · · · · · · · · · · · · · ·	
an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, and on the amendment itself:
(if not applicable, indicate N/A)	THE
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment fit	le date)
Note: If the date inserted in this block does not meet the applicable statutory filing requidocument's effective date on the Department of State's records.	rements, this date will 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 to by the shareholders was/were sufficient for approval.	he amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the ame	ollowing statement endment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
9/13/2018	
Signature Wind ( )	
(By a director, president or other officer - if directors or officer	
selected, by an incorporator — if in the hands of a receiver, trust appointed fiduciary by that fiduciary)	ce, or other court
ENIS QOSJA	
(Typed or printed name of person-signing)	<del></del>
PRESIDENT	<i>P</i> /
(Title of person signing)	