71400056787

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000262334860

07/28/14--01040--013 **35.00

TW JUL 28 ANIO: 05

AUG 0 8 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORA	TION: MAE	HANNA R	EALTY, PA	
DOCUMENT NUMBE	r: <u>P 14001</u>	0056787	·	
The enclosed Articles of	Amendment and fee are sul	bmitted for filing.		
Please return all correspo	ndence concerning this mat	ter to the following:		
_	MA	Name of Contact Person	A	
	MAS	Firm Company	REMITY, 1A	
150 GOLDEN SEACH DR. Address				
	GOLDEN	SEACH F City/ State and Zip Co	1 33 60 de	
	E-mail address: (to bo us	Sawi 5 D 9 ed for future annual repo	t notification)	
For further information c	oncerning this matter, pleas	e call:		
Nome of	Contact Person	at (30	S 606 8865 Code & Daytime Telephone Number	
	ne following amount made j			
. /	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)		
Ameno Divisio P.O. B	g Address Iment Section on of Corporations ox 6327 assee, FL 32314	Amer Divis Clifto 2661	nt Address Indiment Section It is is in a contract of Corporations It is in a contract of Corporations It is in a contract of Corporation of Corporations It is in a contract of Corporation of Corporations of Corporation of Corporat	

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Flo	rida Dept. of State)	
MAE HANNA REALTY	PA.	
(Document Number of Corporation (if k	knowy)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	lorida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must o	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MA	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	ss in Florida, enter the name of the	
Name of New Registered Agent	M/K	
(Florida street	t address)	
New Registered Office Address: (City)	(Zip Code)	28 #10
New Registered Agent's Signature, if changing Registered Agent:	i.	6
I hereby accept the appointment as registered agent. I am familiar wit	th and accept the obligations of the position.	ن ي ا
Signature of New Registered Ag	ent, 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 Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change	<u>Title</u>	Name V (X	Address W/
Add Remove			
2) Change		- N/A	MA
Remove 3) Change Add	.	- WA	MA
Remove 4) Change Add			MA
Change Add		- N/A	NW
Remove 6) Change Add		NA	NIX
Remove			

	ets, if necessary).	·199	,		
			- 1 / / / / / 		
			JV / IL		
<u> </u>	· · ·		 		· · · · · · · · · · · · · · · · · · ·
	•				
					
				· · · · · · · · · · · · · · · · · · ·	
<u>-</u>			· ·		
					, , ,
		- <u> </u>	······································		···
				· · · · · · · · · · · · · · · · · · ·	
				<u> </u>	
	·				
an amendment pro	vides for an excha	inge, reclassificat	ion, or cancellat	ion of issued shar	es.
rovisions for imple	menting the amen	dment if not cont	ained in the amo	endment itself:	
(if not applicable	e, indicate N/A)			. / / /	
				11/14	
				1011	
					· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·			
		· · · · · · · · · · · · · · · · · · ·			

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
Effective date if applicable:		
Enecuve date in applicable.	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adoptive the shareholders was/were sufficiently the shareholders was/were sufficiently the shareholders was/were sufficiently the shareholders was/were adoptive the shareholders was adoptive the shareholder was adoptive the shareholde	pted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast to	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
V	pted by the incorporators without shareholder action and shareholder	
Dated	22/2014 Austrie	
Signature(By a di	rector, president or other officer – if directors or officers have not been	_
	I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Mae Hanna (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	Owner.	
	(Title of person signing)	