P14000061418

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COVER LETTER

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TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: AMT REAL ESTATE, INC

DOCUMENT NUMBER: P14000061418

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

	Ms. Anne Marie Thompson
	Name of Contact Person
	AMT REAL ESTATE, INC.
 .	Firm/ Company
	5810 28th Ave S (fomerly 6263 Fairfield Ave S St. Pete, FI)
	Address
	Gulfport, Florida 33707
	City/ State and Zip Code
	Sellersexpressrealty@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Anne Marie Thompson	727	743-7355
Name of Contact Person	Arca C	ode & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

S35 Filing Fee

□\$43.75 Filing Fee & Certificate of Status S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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 <u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

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	Articles of An	nendment			
	to	'			
	Articles of Inco of	orporation			
	01			P~	
(Name of Corporat	tion or our contly	filad with the F	Jorida Dant /	P I I	-60
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	iment Number of	Corneration (if)		202417 <u>4P</u>	-ED - AIM 7:51
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ursuant to the provisions of section 607,1006, Florid s Articles of Incorporation:	da Statutes, this F	lorida Profit Co	<b>rporation</b> adoption adoption adoption adoption adoption addition additional additiona Additional additional additional additional additional additional additional additional additional additional addi	pts the followi	ng amendanent(s)
A. If amending name, enter the new name of the	corporation:				
					The new
ame must be distinguishable and contain the word "o 'Inc.," or Co.," or the designation "Corp." "Inc 'chartered," "professional association," or the abbi	," or "Co". A				
b. Enter new principal office address, if applicable Principal office address <u>MUST BE A STREET AD</u>					
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE B</u> )	<u>0X</u> )				
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent</li> </ol>		ess in Florida, ei	nter the name	of the	
					_
	(Florida stree	et address)			<del></del>
<u>New Registered Office Address</u> :		Citv)	, ł	·lorida (Zip	Code)
		-		•	·
lew Registered Agent's Signature, if changing Re	gistered Agent:				

Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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: <u>X</u> Change	<u>PT</u>	<u>John Do</u>	<u>c</u>	
X Remove	<u>v</u>	<u>Mike Jo</u>	nes	
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>pith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	P/SEC	-	MS. Anne M Thompson	6263 Fairfield Ave S St.Pete, Fl
Add				<u> </u>
X Remove 2) Change	P/SEC		Mr. Joseph Thompson	5810 28th Avenue S Gulfport, Fl
X Add		-	t	
Remove		-	i	
Add				
Remove				
4) Change		_	·	
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

r. <u>It amenung</u> or a	adding additional Art	ticles, enter chan-	ge(s) here:		
(Attach additional	l sheets, if necessary).	(Be specific)	•		
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F. If an amendmen	t provides for an exc	hange, reclassific	ation, or cancellat	ion of issued shares,	
provisions for i	implementing the am	endment if not co	ntained in the am	<u>endment itself:</u>	
(if not appli	icable, indicate N/A)				
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				<u></u>	
				· · · · · · · · · · · · · · · · · · ·	

date this document was signed	t(s) adoption:	, if other tha
-	12/22/2023	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote:	s cast for the amendment(s) was/were sufficient for approval	
by	,	
	(voting group)	
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder	
	re adopted by the incorporators without shareholder action and shareholder	
The amendment(s) was/wer action was not required.  12/22 Dated		
action was not required. 12/22/ Dated Signature	ame M Thompson	
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action was not required. 12/22/ Dated Signature (B sc	Anne M. Thompson	



FLORIDA DEPARTMENT OF STATE Division of Corporations

February 5, 2024

MS. ANNE MARIE THOMPSON 5810 28TH AVE S GULFPORT, FL 33707

SUBJECT: AMT REAL ESTATE INC Ref. Number: P14000061418

We have received your document for AMT REAL ESTATE INC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 124A00002447