P14 6000 65995

(Re	equestor's Name)	
(Ac	ldress)	
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TO: Amendment Section **Division of Corporations**

NAME OF CORPORAT	TION: BOB RICE, P.A.			
DOCUMENT NUMBER	: 14000065995			
The enclosed Articles of A	Imendment and fee are sul	omitted for filing.		
Please return all correspon	dence concerning this mat	ter to the following:		
RO	BERTE RICE			
		Name of Contact Persor		
BOB RICE, P.A.				
		Firm/ Company		
104	21 CHORLTON CIR			
		Address	.	
OR	LANDO, FL 32832			
- <u></u>		City/ State and Zip Code		
BOBRIC	EUSA@GMAIL.COM			
	E-mail address: (to be us	ed for future annual report	notification)	
For further information co	ncerning this matter, pleas	e call:		
ROBERT RICE		at (407	535-1060	
Name of C	ontact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	e following amount made p	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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

(Name of	Corporation as curre	ntly filed with the Florid	a Dept. of State)
14000065995			,
	(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.10 ts Articles of Incorporation:	06, Florida Statutes, th	nis <i>Florida Profit Corpora</i>	tion adopts the following amendmen
A. If amending name, enter the new nam	e of the corporation:		
A1 REALTY GROUP, INC.			The new
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional associatio	ion "Corp," "Inc," oi	r "Co". A professional c	ncorporated" or the abbreviation
3. Enter new principal office address, if	annlicable:	N/A	1
	Principal office address MUST BE A STREET ADDRESS)		
			7
			25 Z F
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
	or registered office ac	ddress in Florida, enter t	he name of the
new registered agent and/or the new r		ress:	
new registered agent and/or the new r	registered office addr ROBERT E RICE	ress:	
new registered agent and/or the new r			
Name of New Registered Agent	ROBERT E RICE 0421 CHORLTON CI		
new registered agent and/or the new registered Agent Name of New Registered Agent 1	ROBERT E RICE 0421 CHORLTON CI	R	, Florida 32832

Signature of New Registered 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	<u>PT</u>	John Do	<u>ne</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change		_		
Add				
Remove				- Marie - Mari
2) Change				
Add				
Remove				
3) Change				
Add		_		
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

Attach additional sheets,	if necessary). (Be	enter change(s) here especific)	11/4		
 					
<u> </u>				1	
				·	
·					
<u> </u>					
lf an amendment provid	des for an exchange	e, reclassification, or	cancellation of issue	d shares,	
provisions for impleme (if not applicable, in	ndicate N/A)	H/A	in the amendment its	e <u>II:</u>	
		•			
			····		

The date of each amendment(s) adoption: $05/23/16$, if other than the
late this document was signed.
Effective date if applicable: $\frac{03/\sqrt{3}}{\sqrt{0}}$
(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 not be listed as the document's effective date on the Department of State's records.
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)
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 sharcholder action and sharcholder action was not required.
05/21/2016
Dated
Signature // / S / .
(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)
ROBERT RICE
(Typed or printed name of person signing)
PRESIDENT

(Title of person signing)