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C. GOLDEN
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#### COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Sterling Realty As	sociates (Florida) Inc.				
DOCUMENT NUMB	P14000088048					
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.				
Please return all corresp	ondence concerning this ma	tter to the following:				
:	Sarah Grieb					
_	Name of Contact Person					
1	Roetzel & Andress, LPA					
	Firm/ Company					
850 Park Shore Drive - Third Floor						
-	Address					
i	Naples, Florida 34103					
-	<del></del>	City/ State and Zip Cod	<del></del>			
For further information	E-mail address: (to be us	sed for future annual report se call:	notification)			
Sarah Gricb		at (239	649-6200			
Name of	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:			
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address			Address			
Amendment Section		Amendment Section				
Division of Corporations P.O. Box 6327			n of Corporations Building			
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

## FILES

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chi.,

### Articles of Amendment to Articles of Incorporation

	(	of	i
Sterling Realty Associates (Florida) Inc.			ప
(Name	of Corporation as curren	tly filed with the Florida	Dept. of State)
214000088048			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 ts Articles of Incorporation:	1006, Florida Statutes, thi	is Florida Profit Corporati	on adopts the following amendment(s)
A. If amending name, enter the new m	ame of the corporation:		
N/A			The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	"Co". A professional co.	
B. Enter new principal office address, Principal office address <u>MUST BE A S</u>		N/A	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A	
). If amending the registered agent an			name of the
new registered agent and/or the new		<u>:ss:</u>	
Name of New Registered Agent	N/A	·	
	N/A		
	(Florida	street address)	
New Registered Office Address:			, Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c hereby accept the appointment as regist	hanging Registered Ages ered agent. I am familia	nt: r with and accept the obligi	utions of the position.
	Signature of New	Registered Agent, if chang	ing

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>\$v</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Gregory D. Martin	5250 17th Street, Suite 101
X Add			Sarasota, Florida 34235
Remove			
2) Change	P	Terri Martin	5250 17th Street, Suite 101
Add			Sarasota, Florida 34235
X Remove			
3 ) Change	<u>v</u>	Shaun Curnston	5250 17th Street, Suite 101
Add			Sarasota, Florida 34235
X Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
P			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A	
P. 15 annual design of investigation and application of investigation o	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A) N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file dat	c)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	nts, 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 the and by the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follows must be separately provided for each voting group entitled to vote separately on the amendment	
"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 action was not required.	shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and share action was not required.	eholder
December 14, 2017 Dated Signature	Mant:
(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 appointed fiduciary by that fiduciary)	other court
Terri Martin Gregory D. Martin	
(Typed or printed name of person signing)	
Directors	<u> </u>
(Title of person signing)	