## P1500000 3970

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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Special Instructions to Filing Officer:

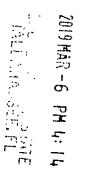




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R. WHITE NIR 14 203





## **COVER LETTER**

TO: Amendment Section  Division of Corporation		4		
NAME OF CORPOR		Realty 1	1 Tampa Bay.	In
DOCUMENT NUMB	ER:		· · · · · · · · · · · · · · · · · · ·	
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:		
·	Dehi	a A. Jac	Lon	
		Name of Contact Person		
-	17775	Firm/Company	1/0	
-	Semino	Le FL	33776	
	Web of	City/ State and Zip Code  ACKSON 7/6  sed for future annual report i	110 grail. com	
	·	·	(Ciricality)	
For further information	concerning this matter, pleas	se call:		
Dehra	Jackson	ai 727	, 743 4083	
Name of	Contact Person		le & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depar	tment of State:	
S35 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)	
Amer Divis	ng Address Idment Section Idment Corporations Box 6327	Division	Address nent Section n of Corporations Building	

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment 2019 MAR - 6 PM 4: 14 Articles of Incorporation (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address:

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
_X Add	SV Sally	Smith	
Type of Action (Check One)  1)	Title	Debra A. Jacko	Address  N. 12775 GUTANE SEMINCE FL33776
2) Change Add			
Remove 3 ) Change Add			
Remove 4) Change Add			
Remove  5) Change Add			
Remove 6) Change			
Add Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· <del>-</del>	
<u> </u>	
	<del></del>
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	· · ·

The date of each amendment(s) adoption: 2/28//9 date this document was signed.	if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
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 east 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 shareholder action and shareholder action was not required.  Dated  Signature  (By a director, president or other officer – it 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)	
(Typed of printed name of person signing)	
Prosichent	
(Title of person signing)	