P15000019534

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	_{RATION:} Rogers A BER: P15000019	ppraisal Com 534	pany, Inc.		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Chad B. Roger	rs			
	<u></u>	Name of Contact Person	n		
	Rogers Appraisal Company, Inc.				
		Firm/ Company			
1882 Forest Glen Way					
		Address			
	Saint Augustin	e, FL 32092			
		City/ State and Zip Cod	е		
oh	nd indernækiel	200 000			
CH	ad_rogers@yal				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
Chad B. Ro	ogers	at (904	, 728-1018		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for	r the following amount made	payable to the Florida Depa	artment 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		<u>St</u> reet	Address		
		Amend	lment Section		
		Division of Corporations			
P.O. Box 6327		Clifton Building			
I all	ahassee, FL 32314		Executive Center Circle assee, FL 32301		

Articles of Amendment to Articles of Incorporation of



Rogers Appraisal Company, Inc.	٠,٠٠٠
(Name of Corporation as currently filed with the Flo	orida Dept. of State)
P15000019534	
(Document Number of Corporation (if	known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Rogers Appraisal, Inc.	The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "P	" "company," or "incorporated" or the abbreviation to". A professional corporation name must contain the P.A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	N/A
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office addre	es in Florida enter the name of the
new registered agent and/or the new registered office address:	33 13 1 1311 GR. Carlet the finance of the
Name of New Registered Agent N/A	
(Florida stree	et address)
New Registered Office Address: N/A	Planida
New Registered Office Address. (City)	, Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position
,	server in conganion of the position.
Signature of New Registered Ag	gent, 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.

X Change	<u>PT</u>	John Doe	
<u>X</u> Řemove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	PD	Chad B. Rogers	1882 Forest Glen Way
Add			Saint Augustine, FL 32092
Remove			
2) Change	<u>v</u>	Christine B. Rogers	1882 Forest Glen Way
Add			Saint Augustine, FL 32092
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
i —			
6) L Change			<u> </u>
Add			
Remove			

E. <u>If a</u> Att	mending or adding additional Articles, enter change(s) here: ach additional sheets, if necessary). (Be specific)
N/A	
<u> </u>	· · · · · · · · · · · · · · · · · · ·
	
	
Ifa	n amendment provides for an exchange, reclassification, or cancellation of issued shares,
<u>pr</u>	ovisions for implementing the amendment if not contained in the amendment itself:
.144	(if not applicable, indicate N/A)
N/A	
· · · · · · · · · · · · · · · · · · ·	
	

date this document was signed	· · · · · · · · · · · · · · · · · · ·	, if other than the
Effective date if applicable:	04/15/2015	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement led 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	(voling group)	
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
Dated_04/	15/2015	
Signature _	Charles Aye	
S	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	Chad B. Rogers	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	_