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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only

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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | ORATION: Rob Severin Real I | Estate Co. | | |
|--|---|---|--|--|
| | 1BER: P15000024677 | ··· | | |
| The enclosed Article | s of Amendment and fee are su | bmitted for filing. | | |
| Please return all com | respondence concerning this ma | tter to the following: | | |
| | Rob Severin | | | |
| | | Name of Contact Person | <u> </u> | |
| | Rob Severin Real Estate Co. | | | |
| | | Firm/ Company | | |
| | 1318 Duncan St. #2 | 1 7 | | |
| | · · · · · · · · · · · · · · · · · · · | Address | | |
| | Key West, FL 33040 | | | |
| | | City/ State and Zip Cod | е | |
| | гоb@robseverin.com | | | |
| | E-mail address: (to be us | sed for future annual report | notification) | |
| For further informati | on concerning this matter, pleas | se call: | | |
| Rob Severin | | at (305 |) 394-3242 de & Daytime Telephone Number | |
| Name of Contact Person | | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check t | for 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 P.O. Box 6327 | | Street Address Amendment Section Division of Corporations The Centre of Tallahassee | | |
| Tallahassee, FL 32314 | | 2415 N. Monroe Street, Suite 810 | | |

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Rob Severin Real Estate Co.

2019 J. 39 PH 2: 34

| (Name of Corporation as currently filed with the Florida Dept. of State) P15000024677 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the follots Articles of Incorporation: A. If amending name, enter the new name of the corporation: Iname must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevianc," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must concentrated," "professional association," or the abbreviation "P.A." 3. 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) | |
|--|-----------------------------------|
| (Document Number of Corporation (if known) ursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the follos Articles of Incorporation: If amending name, enter the new name of the corporation: ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevianc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conchartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS.) Enter new mailing address, if applicable: | |
| ursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the followanticles of Incorporation: If amending name, enter the new name of the corporation: ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviance," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conchartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: | |
| tursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the follows Articles of Incorporation: If amending name, enter the new name of the corporation: ame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviance," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must conchartered," "professional association," or the abbreviation "P.A." Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: | |
| A. If amending name, enter the new name of the corporation: Instance Ins | |
| name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreve "Inc.," or "Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contribute to the contribution of the abbreviation "P.A." 3. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS —————————————————————————————————— | owing amendment(s) |
| Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must co. 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: | |
| Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must co. 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: | The new |
| Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: | iation "Corp.," ntain the word |
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| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | |
| (Maning dadress MAT BE A FOST OFFICE BOX) | |
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| 2. 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: Florida | |
| 1 1 1/() () | Zip Code) |
| (****** | sip code) |
| | |
| ew Registered Agent's Signature, if changing Registered Agent: | |
| hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the positio | on. |
| | |
| | |
| | |
| Signature of New Registered Agent, if changing | |

☐ 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 now 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> | Mike Jones | |
| _X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | Address |
| 1) Change | Broker | Gary Smith | 1500 17th Terrace |
| Add | | | Key West, FL 33040 |
| x Remove | | | |
| 2) Change | Broker | David Austin | 820 Ashe St |
| X Add | | | Key West, FL 33040 |
| Remove Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | | | |
| Add | | | |
| Remove | | | |

| | (Be specific) | | | | |
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| n umendment provides for an excl | iance reclassifica | tion or cancelly | ation of iccurd | chanca | |
| n umendment provides for an excl | nange, reclassifica | tion, or cancells | ition of issued | shares, | |
| n amendment provides for an exclovisions for implementing the ame (if not applicable, indicate N/A) | nange, reclassifica endment if not con | tion, or cancells | ition of issued nendment itsel | shares, f: | |
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| ovisions for implementing the ame | nange, reclassifica | tion, or cancells | ition of issued nendment itsel | shares, f: | |

| The date of each amendment(s) a date this document was signed. | adoption: | , if other than the |
|---|---|-----------------------------------|
| Effective date if applicable: | | |
| - | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable statutory filing requirements, the epartment of State's records. | is date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were ad action was not required. | opted by the incorporators, or board of directors without shareholder | action and shareholder |
| ☐ The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes cast for the amendmufficient for approval. | ient(s) |
| "The number of votes case | proved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s): for the amendment(s) was/were sufficient for approval | temeni |
| by Rob Severin | | |
| | (voting group) | |
| June 24, 20 Dated |)20 ———————————————————————————————————— | |
| Signature | | |
| selecte | irector, president or other officer – if directors or officers have not be d, by an incorporator – if in the hands of a receiver, trustee, or other ted fiduciary by that fiduciary) | en court |
| | Rob Severin | |
| | (Typed or printed name of person signing) | |
| | Registered Agent | |
| | (Title of person signing) | |