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| (Re | equestor's Name) | |
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| PICK-UP | WAIT | MAIL |
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| (Bu | isiness Entity Nan | ne) |
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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Hiling Officer: | |
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Office Use Only





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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: TRUHOME PROP | PERTY MANAGEMENT II | NC. |
|-------------------------|---|--|--|
| | BER: P15000074637 | | |
| | s of Amendment and fee are su | bmitted for filing. | |
| Please return all corre | espondence concerning this ma | tter to the following: | |
| | Jake Johnson | | |
| | | Name of Contact Person | |
| | | Firm/ Company | |
| | 9111 SW 53rd PL, STE A | | |
| | | Address | |
| | Gainesville, FL 32608 | | |
| | | City/ State and Zip Code | |
| jake(| @rentriptide.com | | |
| | E-mail address: (to be us | sed for future annual report | notification) |
| For further information | on concerning this matter, pleas | se call: | |
| Jake Johnson | | at (352 | 871-5541 |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number |
| Enclosed is a check f | or the following amount made | 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) |
| An Div | niling Address endment Section vision of Corporations D. Box 6327 | Amend Divisio | Address ment Section n of Corporations Building |

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

TRUHOME PROPERTY MANAGEMENT INC.

| (Name of Corporation | as currently filed with the Florida | Dept. of State) | | |
|--|--|-------------------|---|--------------|
| P15000074637 | | | | |
| (Documen | t Number of Corporation (if known) | | | |
| Pursuant to the provisions of section 607.1006, Florida S its Articles of Incorporation: | tatutes, this <i>Florida Profit Corporat</i> | ion adopts the fo | ollowing amendme | ent(s) to |
| A. If amending name, enter the new name of the corp | oration: | | | |
| RIPTIDE REALTY GROUP INC. | | | The new | |
| name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab | "Inc," or "Co". A prefessional co | | the abbreviation | 1 |
| B. Enter new principal office address, if applicable: | | | 三 。 | |
| (Principal office address MUST BE A STREET ADDR. | ESS) | | | f 1 |
| | | . " | | Elfer street |
| | | | 6 | |
| C. Enten new mailing address if applicables | | | | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~ | |
| · · · · · · · · · · · · · · · · · · · | | | | |
| | | | <u>न्यात</u> ज | |
| | | | | |
| D. If amending the registered agent and/or registered new registered agent and/or the new registered of | | e name of the | | |
| Name of New Registered Agent | | | | |
| | · · · · · · · · | | | |
| | (Florida street address) | | | |
| New Registered Cifice Address: | | , Florida | | |
| Then hegistered office radiress. | (City) | , 1.01.00 | (Zip Code) | |
| | | | | |
| | | | | |
| New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a | | vations of the po | sition | |
| The too y according approximent as regimered agent. The | me jaminar man ana accept inc omi | samma oj me po | | |
| | | | | |
| | | | | |
| Signate | ura of New Registered Agent of chan | aina | | |

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 Doe | |
|-------------------------------|-----------|-------------|-----------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | | | |
| Add | | | |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | |
| | | | |
| 6) Change | - | | |
| Add | | | |
| Remove | | | |

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| f an amendm | ent provides for an e | xchange, reclass | fication, or can | cellation of issue | l shares, | |
| provisions for | r implementing the a | mendment if not | fication, or can | cellation of issues | l shares, elf: | |
| provisions for | ent provides for an e r implementing the a plicable, indicate N/A | mendment if not | ification, or can contained in th | cellation of issue e amendment itse | <u>l shares,</u> elf: | |
| provisions for | r implementing the a | mendment if not | fication, or can contained in th | cellation of issue e amendment its | l shares, lf: | |
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| provisions for | r implementing the a | mendment if not | ification, or can contained in th | cellation of issues | l shares, | |

| | January 01, 2017 |
|---|---|
| The date of each amendment(s) a date this document was signed. | doption:, 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, this date will not be listed as the epartment of State's records. |
| Adoption of Amendment(s) | (CHECK ONE) |
| The amendment(s) was/were ac by the shareholders was/were s | opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval. |
| | proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s): |
| | for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| | (voting group) |
| | opted by the board of directors without shareholder action and shareholder |
| ☐ The amendment(s) was/were action was not required. | opted by the incorporators without shareholder action and shareholder |
| January 0 | 5, 2017 |
| Dated | |
| | The Tale |
| Signature | director, president or other officer – if directors or officers have not been |
| | ed, by an incorporator – if in the hands of a receiver, trustee, or other court |
| | nted fiduciary by that fiduciary) |
| | Tammy Johnson |
| | (Typed or printed name of person signing) |
| | President |
| | (Title of person signing) |