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PICK-UP	☐ WAIT	MAIL	
(Bi	usiness Entity Name)		
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(Document Number)			
Certified Copies	Certificates of	Status	
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Special Instructions to	Filing Officer:		
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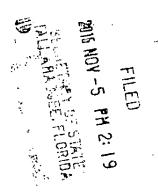




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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPOR		Commercial Crown Grou	up, Inc.	
	P15000083801 ER:			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	Karen Sue Levy			
-		Name of Contact Perso	n	
- -	23245 Oak Prairie Circle	Firm/ Company		
•	Sorrento, FL 32776	Address		
•		City/ State and Zip Cod	е	
kare	en.levy@coldwellbanker.co			
	E-mail address: (to be used for future annua	ll report notification)	
For further information	concerning this matter, pleas	se call:		
Karen Sue Levy		352 at (636-6579)	
Name o	f Contact Person	Area Co	ode & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Dep	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)	
Ame Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Ameno Divisio Cliftor 2661 F	Address Iment Section on of Corporations a Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation

rucies of incorporation

FILED Coldwell Banker Commercial Crown Group, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) HOV -5 PH 2: 19 P15000083801 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A 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." 131 E. 19th Street B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Mount Dora, FL 32757 N/A 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: Florida (Zip Code) (City) 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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change		N/A 	
Add			
Remove			
2) Change			
Add			
Remove			
3)Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Ι/Α	(Attach additional sheets, if necessary). (Be specific)
If	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
Di	royisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
4	(y not appricable, maneure 1921)

The date of each amendment(s) ac	doption:	, if other than the
date this document was signed. N/A		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
10/27/201	5	
Dated		
selecte	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	_
appoin	ted fiduciary by that fiduciary)	
	Karen Sue Levy	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	