## P150000 95386

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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## COVER LETTER

Division of Corporations NAME OF CORPORATION: Real Estate Gallery Property Manage DOCUMENT NUMBER: P1 5000

The enclosed Articles of Amendment and fee are submitted for filing.

TO: Amendment Section

Please return all c

correspondence concerning this matter to the following:
Nanci Soriano
Name of Contact Person
Real Estate Gallery Property Management
Firm/ Company
1925 Park Avenue Unit 2
Address
Orange Park, FL 32073
City/ State and Zip Code
infa@ propertyinjax.com
E-mail address: (to be used for future annual report notification)
nation concerning this matter, please call:
Soriano at 904, 666-5661
ame of Contact Person Area Code & Daytime Telephone Number

For further inform

Nanci Sariano	at (904) 666-5661
Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

**⊠** \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment**

to

Articles of Incorporation

Real Estate Gallery Pro	DOCT MOURAGE PAREIST, IN			
(Name of Corporation as current	ly filed with the Florida Dept. of State)			
P15000095	5386			
(Document Number o	f Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation:	N/A  The new			
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association." or the abbreviation	'Co". A professional corporation name must contain the			
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	1075 Oakleaf Plantation Ste 100 Pki			
	orange Park, FL 3206			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1075 oakleaf Plantation Ste. 100			
	orange Park, FL 32065			
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres				
Name of New Registered Agent Round	A. RIVEYO			
(Florida street address)				
New Registered Office Address: TOCKSON	(City) Florida 3225 (Zip Code)			
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am Jamiliar	t:  yhip and agcept 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.

vake somes, y as wemove.	, ana san	v Smun	5) us an maa.				
Example: <u>X</u> Change	<u>PT</u>	John Do	<u>oe</u>				
X Remove	<u>v</u>	Mike Jo	nes				
X Add	<u>SV</u>	Sally Sn	<u>nith</u>				
Type of Action (Check One)	<u>Title</u>		Name .			<u>Addres</u> s	
1) Change Add Remove	<u>VP</u>	-	<u>Ingrid</u>	Freem		1920 Park Orange Pork	AV FL
2) Change Add Remove	1	_					_ _
3 ) Change Add Remove	1/1	<u>-</u>			_		
4) Change Add Remove	1	_					_ _ _
5) Change Add Remove		+			<del></del> -		<del></del>
6) Change Add Remove	$\overline{N}$		<u> </u>		_		<u>-</u>
	1 //	.   {	Pas	ge 2 of 4			

If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
	<del></del>
· ·	
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
·	

The date of each amendment(s) adoption:	1 1 1 1	, if other than th
date this document was signed.	NIA	
Effective date <u>if applicable</u> : (no	more than 90 days after amendment fi	le date)
Note: If the date inserted in this block does not me document's effective date on the Department of State		irements, this date will not be listed as the
Adoption of Amendment(s) (CHECK	CONE)	
☐ The amendment(s) was/were adopted by the share by the shareholders was/were sufficient for appro		the amendment(s)
☐ The amendment(s) was/were approved by the shar must be separately provided for each voting grou		
"The number of votes cast for the amendmen	• •	
by	<del></del> ,,	
(voting g	group)	
☐ The amendment(s) was/were adopted by the board action was not required.	d of directors without shareholder action	n and shareholder
The amendment(s) was/were adopted by the incoraction was not required.	porators without shareholder action and	l shareholder
Dated 8 (2 (2010) Signature		
(By a director, president	or other officer – if directors or officer ator – if in the hands of a receiver, trust hat fiduciary)	
Raym	ord Rivera ed or printed name of person signing)	<del></del>
	P	
	(Title of person signing)	