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COVER LETTER

TO: Amendment Section

Mailing Address

P.O. Box 6327

Amendment Section
Division of Corporations

Tallahassee, FL 32314

Division of Corporations
NAME OF CORPORATION: ADVANTAGE REALTY & INVESTMENTS INC DOCUMENT NUMBER: P 160000 4612
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
MARIE M CALIXE Name of Contact Person AdVANTAGE Realty and Incustment
Firm/ Company
20801 BISCAYNE BLUD
Miam; EL 33,80
City/ State and Zip Code
City State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Marie M. Calixte at (786) 991-5713
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 Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed)

Street Address

Amendment Section

Division of Corporations Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment

to Articles of Incorporation

A. 1 P. 11	of	
Hovantage Reelty +	Investments, Inc	
^	ion as currently filed with the Florida Dept. of State)	
\$100000019	ment Number of Corporation (if known)	
(Docum	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amen	dment(s) to
A. If amending name, enter the new name of the co	orporation:	
name must be distinguishable and contain the wor	The corporation," "company," or "incorporated" or the abbrevio	
"Corp.," "Inc.," or Co.," or the designation "Corp.	o," "Inc," or "Co". A professional corporation name must contain	
word "chartered," "professional association," or the	abbreviation "P.A."	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		,
(1 Tincipul Office usuress <u>Brost BE A STREET ADE</u>	<u> </u>	
		30 5
C. Enter new mailing address, if applicable:	a diameter and the second seco	型口
(Mailing address MAY BE A POST OFFICE BO	$\frac{\partial x}{\partial x}$	<u></u>
		19
D. If amending the registered agent and/or registered new registered agent and/or the new registered		
Name of New Registered Agent		
	(Florida street address)	
New Proistoned Office Address	, ,	
New Registered Office Address:	, Florida (<i>City</i>) (<i>Lip Code</i>)	_
New Registered Agent's Signature, if changing Reg	wictared Agent.	
	I am familiar with and accept the obligations of the position.	
Sign	nature 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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	SV Sally	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	RUBERT S. CALISTRI	3026 WISTER CR
Add			VALRICO, FL
✓ Remove			32595
2) Change	in VP	JoHN L. WILKERSON	492K NW FLINTSTONE AUG
Add			PORT SAINT LUCIE, FL
Remove	1	Flore Circ Do Al	34983 5736 513 10 Ct
3)Change		MANCOIDE DUKAN	e 57265W 185t West PARK FL 33023
Remove			11 J J J J J J J J J J J J J J J J J J
4) _\/Change	5	Judith candio	1497 a 1/11) & Count
Add	-	Value. Citristo	14820 NW 8 Court Mi AM ? FL 33168
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

•	(Re specific)
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
an amendment provides for an exchorovisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
ino more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s; by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 12/6/2016	
signature Marie M calvete	
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
MARIE M CALIXTE	
(Typed or printed name of person signing)	
PRESIDENT	·
(Title of person signing)	