P16000006316

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: BR Realty, C	rp
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee ar	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
Rebecca K. Marin	_
IBR Realty. Corp	Name of Contact Person
	Firm/ Company
6200 Metrowest Blvd. S	ite 201C
Orlando FL 32835	Address
	City/ State and Zip Code
Rebecca@IBRgroupCorp.com	
E-mail address: (to	e used for future annual report notification)
For further information concerning this matter,	please call:
Rebecca Marin	at (407) 545.5974
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount m	 ade payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State	
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 of

IBR Realty, Corp.

тет. т. т	ll .		
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)	
P16000006316	<u>. </u>		
1 000000 4 2 1 4	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, thi	s Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation {{Corp, " "Inc, " or	ion," "company," or "incorporated" or "Co". A professional corporation name "P.A."	The new the abbreviation must contain the
B. Enter new principal office address,	if applicable:	6200 Metrowest Blvd. Suite 201C	7
(Principal office address MUST BE A S		Orlando FL 32835	节节工
			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		6200 Metrowest Blvd. Suite 201C	(A)
· -		Orlando FL 32835	
D. If amending the registered agent an new registered agent and/or the new			
Name of New Registered Agent	Rebecca K. Marin		
come of the stagistered agent	6200 Metrowest Blvd. S	uite 201C	
	(Florida s	treet address)	
New Registered Office Address:	Orlan d o	, Florida ³²	2835
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		it: with and accept the obligations of the pos	ition.
Rel	un A	Un	
_ 	Signature of New	Registered Agent, if changing	

address of each Officer a (Attach additional sheets, Please note the officer/dir P = President; V = Vice I Executive Officer; CFO = held. President, Treasurer Changes should be noted	and/or D if necess ector titl President Chief F Directo in the for	irector being ary) e by the first : T= Treasur inancial Off or would be F llowing mann orporation, S	added:	Trustee: C = Chairman or Clerk; CEO = Chief than one title, list the first letter of each office PST and Mike Jones is listed as the V. There is should be noted as John Doe, PT as a Change,
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	 <u> me</u> 	Address
1) Change	P	ot	hn D. Marin	6200 Metrowest Blvd. Suite 201C
Add				Orlando FL 32835
X Remove				
2) X Change	P	R	becca K. Marin	6200 Metrowest Blvd. Suite 201C
Add				Orlando FL 32835
Remove				
3) Change	VP	Ri	ifael Ferreira	6200 Metrowest Blvd. Suite 201C
X Add				Orlando FL 32835
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				

_ Remove

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

•		
	08/08/	N/17
The date of each amendment(s) ac	'ii	, if other than
date this document was signed.		
Effective date if applicable:		
	(1	no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De		meet the applicable statutory filing requirements, this date will not be listed as ate's records.
Adoption of Amendment(s)	(CHEC	CK ONE)
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the sha fficient for appr	areholders. The number of votes cast for the amendment(s) proval.
☐ The amendment(s) was/were app must be separately provided for	proved by the sh	hareholders through voting groups. The following statement coup entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendm	nent(s) was/were sufficient for approval
by		,,,
	(voting	g group)
☐ The amendment(s) was/were add action was not required.	opted by the b oa	ard of directors without shareholder action and shareholder
The amendment(s) was/were add action was not required.	opted by the inco	corporators without shareholder action and shareholder
08/08/17	-	
Dated		Dim O/
Signature	rector presider	nt or other officer – if directors or officers have not been
selecte	d. by an incompo	orator – if in the hands of a receiver, trustee, or other court
арроірн	ed fiduciary by	that fiduciary)
	John D. Marin	1
	— <u> </u> (Tyl	rped or printed name of person signing)
	President	
		(Title of person signing)