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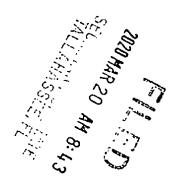
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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: QUALITY RENTAL MANAGEMENT, INC
DOCUMENT NUMBER: P16000029858
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
QUINONES, LUZ
Name of Contact Person
QUALITY RENTAL MANAGEMENT, INC
Firm/ Company
2080 Collier Ave
Address
Fort Myers, FL 33901
City/ State and Zip Code
lucyqpa@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
BRIANNA QUINONES at (239) 1652 - 0066 Name of Contact Person Area Code & Daytime Telephone Number
Mea 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 Certified Copy Certificate of Status (Additional copy is enclosed) \$35 Filing Fee Certificate of Status Certified Copy Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tailahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

<i>QUALITY</i>	RENTAL	MANAGEMENT,	INC
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QUALITI KENTAL MANAGEMENT, INC			
(Name of Corporation as c	urrently filed with the F	lorida Dept. of State)	
P16000029858			
(Document Nu	ımber of Corporation (if kı	nown)	_
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this <i>Florida Profit Cor</i>	poration adopts the follo	wing amendme
A. If amending name, enter the new name of the corporat	tion:		
QUALITY RESIDENTIAL MANAGEMENT, INC			
name must be distinguishable and contain the word "corporati "Inc.," or Co.," or the designation "Corp." "Inc," or "C "chartered," "professional association," or the abbreviation	Co". A professional cort	orporated" or the abbrevi poration name must con	The new ation "Corp.," ation the word
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u>))	:[20
	- · · · · · · · · · · · · · · · · · · ·		·22
C. Enter new mailing address, if applicable:			20
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	
		<u></u>	œ 🔚
			£-
		<u> </u>	<u> </u>
 If amending the registered agent and/or registered office new registered agent and/or the new registered office ad 	e address in Florida, ent	er the name of the	
new registered agent and/or the new registered office ad	agress:		
Name of New Registered Agent			
(Flor	rida street address)		_
New Registered Office Address:		, Florida	
	(City)	(Zij	p Code)
lew Registered Agent's Signature, if changing Registered A	\ gent·		
hereby accept the appointment as registered agent. I am fam	iliar with and accept the o	bligations of the position	l .
Signature of N	lew Registered Agent, if ch	· · · · · · · · · · · · · · · · · · ·	_
	гом пединегеа Agent, IJ Ch	ianging	
heck if applicable			

[☐] The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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> <u>Jol</u>	un Doc	
X Remove	<u>∨</u> <u>Mi</u>	ke Jones	
<u>X</u> Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	LUZ QUINONES	3010 LAKE MANATEE CT
Add			CAPE CORAL, FL 33909
x Remove			
2) Change	<i>VP</i>	JOHN ANDREW HENTHORN	1104 CITRUS OAKS RUN
$\frac{X}{}$ Add		——————————————————————————————————————	WINTER SPRINGS, FL 32708
Remove Change	<u>P</u>	Renaldo Ovinones	3010 Lalle MANATER C
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necest mendment to Article IV 100% of th	· •	ad an fall		
	e shares to be distribute	a as jouows		
Renaldo Quinones 50%				
Luz Quinones 50%				· <u> </u>
			<u> </u>	·
	-			<u> </u>
				
		· · · · · · · · · · · · · · · · · · ·	· · · · · - · · · · · · · · · · ·	
	·			
			·	
If an amendment provides for an	exchange, reclassifica	tion, or cancellation of	issued shares,	
provisions for implementing the (if not applicable, indicate N/	Bmendment if not con	tained in the amendme	nt itself:	
	•			
				

	March 13, 2020	, if other than the
The date of each amendment(s) addate this document was signed.	option:	, it outer than the
	h 13, 2020	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file d	ate)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requiren partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without sha	reholder action and shareholder
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the flicient for approval.	amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The followard followed by the same of the	owing statement ment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
DatedSignature	3/3/2020	
(By att	rector, president or other officer - if directors or officers ha	ave not been
selegted	l, by an incorporator - if in the hands of a receiver, trustee,	or other court
appoint	ed fiduciary by that fiduciary)	
•	Renaldo Quinones	
	(Typed or printed name of person signing)	
	Aracidem Incorporator	
	(Title of person signing)	