# P1600032833

(Re	equestor's Name)	· · · · ·-		
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FILEU SECRETARY OF STATE STYLSION OF CORPORATION

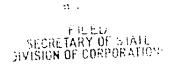
AUG 5 2016 C LEWIS

### COVER LETTER .

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	ST. PETERSBUR	G MIDTOWN PO	OST OFF	ICE INC.	
DOCUMENT NUMBER:	P16000032833				
The enclosed Articles of Amend	<i>ment</i> and fee are su	bmitted for filing.	•		
Please return all correspondence	concerning this ma	tter to the followi	ng:		
·	_				
***	MAX D. PUYAN	NIC			
		Name of Cont	act Person	n	
		Firm/ Cor	npany		
	30 WEST MASHTA DRIVE, SUITE 400				
		Addre	:ss		
	KEY BISCAYNE, FL 33149				
		City/ State and	l Zip Cod	e	
	MAXP@COMMO	DOREREALTY	.COM		
E-ma	uil address: (to be us	sed for future annu	ual report	notification)	
For further information concerni	ng this matter, pleas	se call:			
MAX D. PUYANIC		at (	305	365-2600 X 26	
Name of Contact	Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the follow	wing amount made	payable to the Flo	rida Depa	artment of State:	
	3.75 Filing Fee & rtificate of Status	□\$43.75 Filing Certified Cop (Additional control enclosed)	ру	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Cassee, FL 32301	

#### **Articles of Amendment** to Articles of Incorporation of



ST. PETERSBURG MIDTOWN POST OFFICE INC.

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#### (Name of Corporation as currently filed with the Florida Dept. of State)

P160000032833

nt(s) to

(Documen	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corp	oration:
SEA BREEZE RETAIL INVESTMENTS, INC.	The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abl	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	ESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered off	ice aduress:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	ered Agent:
I hereby accept the appointment as registered agent. I a	m familiar with and accept the obligations of the position.
	<del>.</del>

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 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				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		<del></del>		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change				
Add				
Remove				

Attach additional sheets, if necessary).	(Be specific)
· ·	
10	-V
f an amendment provides for an exchaprovisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
	·
	- 17.6

	JULY 21, 2016	10 1
The date of each amendment(s) ado date this document was signed.	ption:	, if other than th
iale this document was signed.		r II. Lib.
Effective date if applicable:		SECRETARY OF STAIL
	(no more than 90 days after amendment f	file date)
Note: If the date inserted in this blo locument's effective date on the Department.	ock does not meet the applicable statutory filing requartment of State's records.	2016 JUL 29 PM 3: 33 pirements, this date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopt by the shareholders was/were suff	ted by the shareholders. The number of votes cast for icient for approval.	the amendment(s)
	oved by the shareholders through voting groups. The jack voting group entitled to vote separately on the an	
"The number of votes cast fo	r the amendment(s) was/were sufficient for approval	
by	(voting group)	,,
	(voting group)	
action was not required.	ted by the board of directors without shareholder action and the incorporators without shareholder action and	
Dated	1 22, 2016	
	ector, president or other officer – if directors or officer	rs have not been
selected,	by an incorporator - if in the hands of a receiver, trus	
appointed	fiduciary by that fiduciary)	
	MAX D. PUYANIC	
••••	(Typed or printed name of person signing)	<del> </del>
	PRESIDENT	
••••	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·