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COVER LETTER

TO: Amendment Section Division of Corporations ,

Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF GODING	15170	11 08/61	OPMENT AND	021/0/
			OF MERCI AND	KBALLY, ME
DOCUMENT NUMB	ER: <u>P16000</u>	05849/		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		2917 (
-	DAV	Name of Contact Person	0	24H OCT -4
-			AND NEALTY	ı r
-		PARILVIEW Address		
-	PLANT	City/ State and Zip Cod	33563	_
	E-mail address: (to be us	3 B ADL, a sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
DAYI	DHAM	at (8 13	de & Daytime Telephone Number	8_
Name o	of Contact Person	Area Co	de & Daytime Telephone Numbe	er .
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ing Address ndment Section		Address Iment Section	

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

	of	00
CENTRAL DEVELOPME	WI AND REALTY, INC	
	tion as currently filed with the Florida Dept. of State)	至
P160000S	ment Number of Corporation (if known)	<u></u>
(Docu	ment Number of Corporation (if known)	20
Pursuant to the provisions of section 607,1006, Floridits Articles of Incorporation:	da Statutes, this Florida Profit Corporation adopts the following	ng amendment(s) to
A. If amending name, enter the new name of the o	corporation:	
		The new
		t contain the
(Principal office address <u>MUST BE A STREET AD</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B)	<u></u>	
		
	ered office address in Florida, enter the name of the	
new registered agent and/or the new registered	d office address:	
Name of New Registered Agent		
	(Florida street address)	_
New Registered Office Address:	, Florida	
		Code)
New Registered Agent's Signature, if changing Re	egistered Agent:	
i nereoy accept the appointment as registered agent.	I am familiar with and accept the obligations of the position.	
Sig	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	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
l) Change	15	2	BETTY F KURTZ	
X Add				SUNSET LAKE DA
Remove				LAKELAND, FL 338/
2) Change		_		
Add				
Remove				
3) Change				***************************************
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
**	
f an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
lif not amblimble indiana Wes	
(if not applicable, indicate N/A)	
ду пос аррисате, maicate iVA)	
лу пог аррисате, maicate iVA)	
(у пог аррисате, maicate iVA)	
лу ног аррисате, maicate iVA)	
лу пот аррисате, mateate iVA)	
д ног аррисаоне, mateate AVA)	
д пот аррисаоле, таксале пла)	
(д пол аррисаоле, mateate AVA)	

The date of each amendment(s) as date this document was signed.	loption:	, if other than th
, –	9-29-17 (no more than 90 days after amendment file date)	
<u></u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements partment of State's records.	, this date will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east for the amerafficient for approval.	ndment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and sh	areholder
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	older
Dated	-29-17	
Signature	-29-17 eyel Ham	
(By a d	frector, president or other officer – if directors or officers have n	ot been
	 d, by an incorporator – if in the hands of a receiver, trustee, or of ted fiduciary by that fiduciary) 	her court
	FAYE J HAM (Typed or printed name of person signing)	
	(Typed or printed name of person signing)	
	PRESIPENT (Title of person signing)	
	(Title of person signing)	