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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATI		it Lundberg RE PA		
DOCUMENT NUMBER:	P1	6000098637		
The enclosed Articles of Ar	mendment and fee are su	bmitted for filing.		
Please return all correspond	fence concerning this ma	tter to the following:		
		Sonia Becerra		
Managhar rama		Name of Contact Person	n	
		Swyft Filings		
		Firm/ Company		
		12605 East Freeway Su	ite 509	
		Address		
		Houston, Texas 770	15	
		City/ State and Zip Cod	e	
		filings@swyftfilings.co	m	
	E-mail address: (to be u	sed for future annual report	notification)	
For further information con	cerning this matter, pleas	se call:		
Sonia Becerra	a	at (877	777-0450	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address		Street Address		
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box	6327	Clifton Building		
Tallahassee, FL 32314 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Grant Lundberg RE PA

(Name of Corporation as currently filed with the Florida Dept. of State) P16000098637

(Document Number of Corporation (if known)

If amending name, enter the new name of the			
	Grant Lur	ndberg PA	TO The
ne must be distinguishable and contain the worp.," "Inc.," or Co.," or the designation "Cond" d'chartered," "professional association," or the	rp," "Inc," or "Co". A profession		
Enter new principal office address, if applicat ncipal office address <u>MUST BE A STREET AI</u>			E TLORD

	(OX)		
Mailing address MAY BE A POST OFFICE B f amending the registered agent and/or regist	tered office address in Florida, er	iter the name of t	he
Mailing address MAY BE A POST OFFICE B If amending the registered agent and/or regist	tered office address in Florida, er	nter the name of t	he
Mailing address MAY BE A POST OFFICE B f amending the registered agent and/or regist	tered office address in Florida, er	nter the name of t	he
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B) If amending the registered agent and/or registered registered agent and/or registered agent and/or the new registered Name of New Registered Agent	tered office address in Florida, en d office address:	nter the name of t	he
Mailing address MAY BE A POST OFFICE B If amending the registered agent and/or registered agent and/or registered agent and/or registered.	tered office address in Florida, er	nter the name of t	

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.

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)	Title		Name		<u>Addres</u> s
I)Change				_	
Add					***************************************
Remove					
2) Change		_		_	
Add					
Remove					
3) Change					-
Add					
Remove					
4) Change					
Add		-			
Remove					
5) Change		_			
Add					
Remove					
6) Change		_		_	
Add				- ,	
Remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
if an amendment provides for an exch. provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an analysis of the angel and the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) ad	loption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast i	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adoraction was not required.	pted by the incorporators without shareholder action and shareholder	
Dated 4/13	4 + 1.11	
XSignature	we pellellery	·
selected	rector, president or other officer - if directors or officers have not been by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	6ZANT LUNDBERG (Typed or printed name of person signing)	
- -	(Typed or printed name of person signing)	
	President	
_	(Title of person signing)	

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