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APR 12 2017

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION: Gilbert & Cahn Re	ealtors Inc		
DOCUMENT NUMBE	D1 = 0.000 1 = 1 1 1			
The enclosed Articles of	Amendment and fee are su	ibmitted for filing.		
Please return all correspo	ondence concerning this ma	atter to the following:		
A	J. Lofendo CPA			
***	······································	Name of Contact Perso	n	
A	J. Lofendo PA			
*****		Firm/ Company		
82	Valley Stream Lane			
	Address			
Na	ples, FL 34113			
_	•	City/ State and Zip Cod	c	
lo fendo 2	3@gmail.com			
		sed for future annual report	notification)	
	2 11111 000101111 (01 10 11		,	
For further information co	oncerning this matter, pleas	se call:		
A. J, Lofendo CPA		at (²³⁹	250-3810 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for th	e following amount made p	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 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

17	APR	10	AH []:	21
A				

Articles of Incorporation as currently filed with the Florida Dco (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation." "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: 785 Carrick Bend Circle #202 (Mailing address MAY BE A POST OFFICE BOX) Naples, FL 34110 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Sandra Gilbert Name of New Registered Agent 785 Carrick Bend Circle #202 (Florida street address) Florida 34110 New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	August Lofendo	82 Valley Stram Lane
Add			and the state of t
x Remove			Naples, FL 34113
2) Change	þ	Sandra Gilbert	785 Carrick Bend Circle
x Add	 ,		#202
Remove			Naples, FL 34110
3) Change	VP	Bruce Cahn	785 Carrick Bend Circle
x Add			#202
Remove			Naples, FL 34110
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
_			
Add			
Remove			

<u>If amendir</u> (Attach <i>ada</i>	ng or adding additional Articles, enter change(s) here: itional sheets, if necessary). (Be specific)
	
provisions	dment provides for an exchange, reclassification, or cancellation of issued shares, s for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)
·- <u></u>	

The same of the sa	April 3,2017	
The date of each amendment(s) adopt date this document was signed.	iion:	, if other than the
April 3.	2017	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	c does not meet the applicable statutory filing requirements, the	tis date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders was/were suffici	d by the shareholders. The number of votes cast for the amendation for approval.	nent(s)
☐ The amendment(s) was/were approve must be separately provided for each	ed by the shareholders through voting groups. The following sta h voting group entitled to vote separately on the amendment(s):	alement
"The number of votes cast for t	the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adopted action was not required.	by the board of directors without shareholder action and sharel	holder
The amendment(s) was/were adopted action was not required.	by the incorporators without shareholder action and shareholde	er
April 3, 2017 Dated Signature Ø	rdea Gilbert	
(By/a directe	or, president or other officer - if directors or officers have not b	
	an incorporator – if in the hands of a receiver, trustee, or other iduciary by that fiduciary)	court
Sand	dra Gilbert	
	(Typed or printed name of person signing)	
Pres	ident	
	(Title of person signing)	