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C. GOLDEN
JUN 2 9 2017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE WRIGHT RE	ALTOR PA				
DOCUMENT NUMBER: P17000027184					
The enclosed Articles of Amendment and fee are sul	bmitted for filing.				
Please return all correspondence concerning this mat	tter to the following:				
DANIELLE WRIGHT					
	Name of Contact Person				
REMAX WATER MARKE	REMAX WATER MARKE				
	Firm/ Company				
922 THIRD STREET NORT	11				
	Address				
JACKSONVILLE BEACH F	LORIDA 32250				
	City/ State and Zip Code	:			
DANIELLE@THEWRIGHTREAL	TOR.COM				
	sed for future annual report	notification)			
For further information concerning this matter, pleas DANIELLE WRIGHT		534-1017			
Name of Contact Person	at (area Coe) 534-1017 de & Daytime Telephone Number			
Enclosed is a check for the following amount made p					
■ \$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 Articles of Incorporation of

FILED

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THE WRIGHT REALTOR PA

	(Name of Corporation	as currently fi	<u>led with the Florid</u>	a Dept. of State)
917000027184	Pin	$\omega\omega$	4511	(M) = 1,
	(Documen	t Number of Co	rporation (if known	
Pursuant to the provisions of sec its Articles of Incorporation:	tion 607,1006, Florida St	atutes, this Flo	rida Profit Corpora	ation adopts the following amendment
A. If amending name, enter th	e new name of the corp	oration:		
DANIELLE WRIGHT PA				The new
name must be distinguishable "Corp.," "Inc.," or Co.," or d word "chartered," "professiona	ie designation "Corp," :	"Inc," or "Co	". A professional c	incorporated" or the abbreviation corporation name must contain the
B. <u>Enter new principal office</u> : (Principal office address <u>MUST</u>		ESS)		
		-		
		-		
C. Enter new mailing address (Mailing address MAY BE)				
(maining dadress myr bt. 7	TOST OFFICE BOX	-		
		-		····
		-		· · · · · · · · · · · · · · · · · · ·
D. If amending the registered new registered agent and/o			in Florida, enter t	he name of the
Name of New Registere	d Agent			
		(Florida street i	iddress)	
New Registered Office .	Address;			, Florida
		(Cit	in.	(Zīp Code)
New Registered Agent's Signal	ture, if changing Registe	ered Agent:		
hereby accept the appointment			and accept the obli	igations of the position.
	Signata	re of New Revi	stered Agent, if chai	

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 Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3 + Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mach additional	lding additional Articles, e sheets, if necessary).— (Be s	specific)		
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- · · ·				·
f an amandmant	provides for an exchange,	enclassification or on	noullation of issued show	****
provisions for in	plementing the amendmen	it if not contained in t	he amendment itself:	<u>cs.</u>
(if not applic	able, indicate N/A)			
				
			· · · · · ·	
		·	· · · · · · · · · · · · · · · · · · ·	
			·	
				<u></u>

	, if other than th
date this document was signed,	
06/08/2017	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as th
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes east for the amendment(s) was/were sufficient for approval	
by'''	
(voting group)	
 □ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. □ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder 	
action was not required	
06/08/2017	
Signature	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
DANIELLE WRIGHT	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	