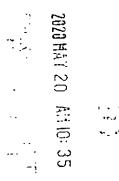
## P17000041588

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SHAMONS MAY 21 2020



May 15, 2020

FRANK D. SCHRADER 1540 HIGHLAND AVE STE A MELBOURNE, FL 32935

SUBJECT: REAL ESTATE DIRECT OF FLORIDA, INC.

Ref. Number: P17000041588

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 120A00009928

Querida R Moore Regulatory Specialist II

## COVER LETTER

TO: Amendment Section No. 10 Provided the Corporations No. 10 Provided the Corporations No. 10 Provided the Corporation No. 10
NAME OF CORPORATION: Real Estate Direct of Florida Inc DOCUMENT NUMBER: P17000041588
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Frank D. Schrader  Name of Contact Person  Real Estate Direct of Florida Inc  Firm/ Company  1540 Highland Ave Ste A  Address  Melbourne, FL 32935  City/ State and Zip Code  dreynolds 891 G smail. com  E-mail address: (to be used for future about report notification)
For further information concerning this matter, please call:    Debbie Remolds   at (321)   254-0688     Name of Contact Person   Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)  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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## **Articles of Amendment**

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	Articles of Incorporation		$zI_{xx}$
Real Estate (Name of Corn	of  Direct of Florida  oration as currently filed with the Florida I		AH 10: 35
P 17/	XXXX11588	£ į	
(D	Occument Number of Corporation (if known)		<del></del>
Pursuant to the provisions of section 607,1006, F its Articles of Incorporation:	lorida Statutes, this Florida Profit Corporatio	n adopts the following	g amendment(s) to
A. If amending name, enter the new name of t	the corporation:		
			The new
name must be distinguishable and contain the wor "Inc.," or Co.," or the designation "Corp." "chartered," "professional association," or the c	"Inc." or "Co". A professional corporatio		
B. Enter new principal office address, if appli (Principal office address <u>MUST BE A STREET</u>			
C. Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFIC)	<u></u>		
D. If amending the registered agent and/or renew registered agent and/or the new regist		name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida/Zip C	<u> </u>
	(City)	тир С	(KIE)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered ag	<u>e Registered Agent:</u> ent. I am familiar with and accept the obliga	tions of the position.	
	Signature of New Registered Agent, if changi-	ng	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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, PTess a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT John	Doe	
X Remove		: Jones	20
X Add		· Smith	Address 35
Type of Action (Check One)	<u>Title</u>	Name	Address $\frac{1}{1}$ $\frac{1}{2}$ $\frac{1}{2}$
1) Change	P	Frank D Schrader	565 Montral Ave
Add			Melbourne, FZ 32935
Remove  2) X Change	<u>P</u>	Jennifer Louise Marin	1470 Talamore St Viera, FL 32940
Add Remove 3 ) Change			
Add Remove 4) Change			
Add			
5) Change Add Remove			
6) Change			
Remove			

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n of issued shares,	
dment itself:	
	n of issued shares, dment itself:

The date of each amendment(s) as	daption:		, if other than the
date this document was signed.			
Effective date if applicable:	2920	MAY 20 AH 10: 35	
<del></del> -	ino more than 90 days after amendine	nı jile date)	
Note: If the date inserted in this bidocument's effective date on the De	block does not meet the applicable statutory filing		ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	•	
☐ The amendment(s) was/were ado action was not required.	opted by the incorporators, or board of directors with	liout shareholder action an	nd shareholder
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cas afficient for approval.	t for the amendment(s)	
	proved by the shareholders through voting groups, each voting group entitled to vote separately on the		
"The number of votes cast	for the amendment(s) was were sufficient for appro-	wai	
by			
	tvoting group:		
Dated April	27, 2020		
Signature	Compressions than 2		
selected	irector, president or other officer—if directors or off d. by an incorporator—if in the hands of a receiver, ted fiduciary by that fiduciary)		
	Jennifer Louise Max (Typed or printed name of person signin	rin	
_	(Tarad or oriented numer of marron stories	\	
	t typed or printed name of person signin	ig)	
	President	ığı	