P1700048843

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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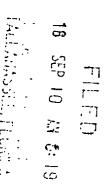




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SEP 13 2018 S. YOUNG



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: THE PROPER P	IPE II, INC.						
DOCUMENT NUMB	ER: P17000048843							
The enclosed Articles of	of Amendment and fee are su	bmitted for fil	ing.					
Please return all corresp	oondence concerning this ma	tter to the follo	owing:					
i	KESHAV AGRAWAL							
-		Name of C	ontact Persor	1				
1	PREM TAX AND ACCOU	NTING CORF	o					
-		Firm/ (Company					
4	Firm/ Company 4260 WESTBROOK DR, SUITE 107							
-		Ad	ldress					
,	AURORA, IL 60504							
_		City/ State	and Zip Code	,				
INFO	@SMALLTAX.NET							
	E-mail address: (to be us	sed for future a	innual report	notification)				
For further information KESHAV AGRAWAL	concerning this matter, pleas		630	, 448-2066				
Name o	f Contact Person	at		de & Daytime Telephone Number				
Enclosed is a check for	the following amount made	payable to the	Florida Depa	rtment of State:				
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fi Certified (Additional enclosed)	il copy is	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)				

Articles of Amendment to Articles of Incorporation of

T	н	F	Р	R	റ	Р	F	R	P	ıΡ	F	Ħ	INC	2.

·	-	rently filed with the Florida Dept. of St	
P17000048843			
	(Document Num	ber of Corporation (if known)	
its Articles of Incorporation:		this Florida Profit Corporation adopts the	he following amendment(s) to
A. If amending name, enter the new na	ime of the corporatio	<u>n:</u>	
			The new
	ation "Corp." "Inc."	oration," "company," or "incorporated" for "Co". A professional corporation nation "P.A."	
B. Enter new principal office address, (Principal office address MUST BE A S			· · · · · · · · · · · · · · · · · · ·
			8
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		4650 N. ALAFAYA TRAIL	# 10 TI
		UNIT 102	7
		ORŁANDO, FL 32826	10 m
D. If amending the registered agent ar new registered agent and/or the new		address in Florida, enter the name of the	
Name of New Registered Agent			
	4650 N. ALAFAYA	TRAIL, UNIT 102	
	(Flori	da street address)	 -
New Registered Office Address:	ORLANDO	, Floric	32826
		(City)	(Zip Code)
N <u>ew Registered Office Address:</u>			

Signature of New Registered Agent, if changing

Sorals more

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:		Jalan Dan					
X_Change	<u>PT</u>	John Doe					
X Remove	V	Mike Jones					
X Add	<u>SV</u>	Sally Smith					
Type of Action (Check One)	<u>Title</u>	Name	Address				
1) Change	PTD	ANJU SULTANIA	5753 SAYBROOK CIRCLE				
Add			SANFORD, FL 32771				
X Remove							
2) X Change	VD	AUSTIN DEVINE	8185 SE VILLA WAY				
Add			HOBE SOUND, FL 33455				
Remove	PTSD	DOUGLAS J. MARKOVITZ	4650 N ALAFAYA TRAIL, UNIT 102				
3) Change Add		-	ORLANDO, FL 32826				
Remove							
4) Change		_					
Add							
Remove							
5) Change		_					
Add							
Remove							
6) Change		_					
Add							
Remove							

Attach additional sheets, if necessary).	(Be specific)
<u> </u>	
· · · · · · · · · · · · · · · · · · ·	
	
	<u> </u>
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Hamen is not contained in the discretion users.

• •	SEPTEMBER 01, 2018	
	doption:	if other than the
date this document was signed.	NTT-110ED 04 0040	
SEF Effective date <u>if applicable</u> :	PTEMBER 01, 2018	
Effective date in applicative.	(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, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendment(afficient for approval.	s)
☐ The amendment(s) was/were appropriate the separately provided for	proved by the shareholders through voting groups. The following statem each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were addaction was not required.	opted by the board of directors without shareholder action and sharehold	er .
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
Dated9_/	South mom	
Signature	Sough musm	
(By a C	ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
	Douglas Markovitz	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	