## P1700049861

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S. PRATHER

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: RR REAL ESTAT	E SERVICES, P.A	
DOCUMENT NUMB	P170000J9861		
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
i	ROBERTO JOSE RUIZ		
-		Name of Contact Person	ก
1	RR REAL ESTATE SERVIC	T:S, P.A	
-	<del></del>	Firm, Company	
ı	0400 NW 66TH ST		
<del>-</del>		Address	
1	OORAL, H.ORIDA, 33178		
<del>-</del>		City State and Zip Cod	°
roberte	ruizmartuno@ gmail.com		
		sed for future annual report	notification)
For further information	concerning this matter, pleas		2214710
	Contact Person	au (	3344710
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	puyuble to the Florida Depa	irtment of State;
S35 Filling 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)
- Amer Divis P.O. I	ng Address idment Section ion of Corporations Box 6327 nassee, F1, 32314	Amend Divisio Clition 2661 E	Address Iment Section on of Corporations Building (xecutive Center Circle ussee, F1, 32301

## Articles of Amendment to Articles of Incorporation of

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IN IN	INT.	-11	1.51	·/ I I ·	N 16 1	. 11 1.	1'-1

BT PART		
(Name of Corporation as curren	itiy iiled w <u>ith</u> the <u>Florida Dept.</u>	ot State)
17000049861		
(Document Number	of Corporation (if known)	
rrsuant to the provisions of section 607,1006. Florida Statutes, thi Articles of Incorporation.	s Florida Profit Corporation ad	opts the following amendments
If amending name, enter the new name of the corporation:		
OBERTO JOSE RUZ, P.A		The new
unc must be distinguishable and contain the word "corporate 'orp ," "Inc ," or Co.," or the designation "Corp," "Inc," or and "chartered," "professional association," or the abbreviation	"Co" A professional corpora	rated" or the abbreviation
Enter new principal office address, if applicable:	N A	
rincipal office address <u>MUST BE A STREET ADDRESS</u> )		<u> </u>
<del>-</del>	<del>-</del>	
Euter new mailing address, if applicable:	N A	22 3 € 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Mailing address MAY BE A POST OFFICE BOX)		<u>≃</u> '.
		$\gamma = \gamma_{ij} + \gamma_{ij} + \gamma_{ij}$
	<del></del>	
If amending the registered agent and/or registered office ad-	dress in Florida, enter the nam	e of the
new registered agent and/or the new registered office addre	<u>88:</u>	
Name of New Regretered Agent N'A		
мате од леж педмизен муст		· - ·
(Florida s	treet address)	
		Florida

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: <u>X</u> Change	<u>P1</u>	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	$\underline{S}\underline{\Sigma}$	Sally Smith	
Type of Action (Check One)	Little	Name	<u>Addres</u> s
1) Change		N A	
Add			
Remove			
2) Change		N A	
Add			
_ Remove			
3 ) Change		N A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Clainge		N-A	
Add			
Remove			
41 Change		N A	
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Re specific)	
KX	
	<del></del>
. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
S A	
	<del></del>
<u>.                                    </u>	
	<del></del>

The date of each amendment(s) adoption: date this document was signed.	if	other t	han th
Effective date if applicable:			
(no more than 90 days after amendment file date)			
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date vidocument's effective date on the Department of State's records.	vill not b	e listec	I as th
Adoption of Amendment(s) (CHECK ONE)			
☐ The amendment(s) was were adopted by the shareholders. The number of votes east 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 cast for the amendment(s) was were sufficient for approval			
by			
(voting group)	1		
☐ 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	SECILLA HAS	17 JUL -(	
action was not required.  Dated OG / 20 / 80 / 7	<i>₹.</i>	3 PH 2:	
Signature		0.6	
(B) a director president or other orticer—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)			
ROBERIO J RUIZ			
(Typed or printed name of person signing)			
PRESIDENT			
Clatte of person signing)			