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SEP 28 7017

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Advantage	E REAL ESTATE Professional INC
	000066896
The enclosed Articles of Amendment and fee are su	bmitted for filing.
Please return all correspondence concerning this mat	iter to the following:
DONNA	M. DAWSON RA Name of Contact Person
<u>Advantage</u> R	EAL ESTATE PROFESSIONALS IN
15654 97H	h Dr. Address
•	L 32060 City/ State and Zip Code
dawnah_200 E-mail address: (to be us	ed for Tuture annual report notification)
For further information concerning this matter, pleas	e call:
DOWNA DAWSON	at (386) 288-5679 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Department of State:
□ \$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	\$\\$\\$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate of St
Mailing Address Amendment Section Division of Corporations	Street Address Amendment Section Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

FILED

Articles of Incorporation of

17 SEP 27 AM 10: 17

Advantage Real ESTATE Pro	fessionals Tille	EY OF STATE
	ently filed with the Florida Dept	Tor State PRODA
P17000066896		
(Decument Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation ac	lopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>ı:</u>	
	NA	The new
name must be distinguishable and contain the word "corpor "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbreviati	or "Co". A professional corpore	orated" or the abbreviation ition name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		WARD ST. W. FL 32064
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	NA	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		ne of the
Name of New Registered Agent	NA	
· · · · · · · · · · · · · · · · · · ·	ki street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A. I hereby accept the appointment as registered agent. I am fami		s of the position.
	NA	
Signature of N	ew 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doc			
X Remove	<u>v</u>	Mike Jones		NK	
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title	<u>Nar</u>	<u>ne</u>		Address
1) Change				 	
Add					
Remove					
2) Change		 			
Add					
Remove					
3.)Change					
Add					
Remove					
4)Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

mending or adding additional Ar ach additional sheets, if necessary).	. (Be specific)	N-A	
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 -			
an amendment provides for an ex	change, reclassification, or	cancellation of issued shares,	
rovisions for implementing the an	<u>nendment if not contained i</u>	n the amendment itself:	NA
(if not applicable, indicate NA)			

The date of each amendment(s) adoption: _ date this document was signed	September	25th	2017	, if other than the
Effective date <u>if applicable</u> :	SEPTEMBER (no more than 90 day			
Note: If the date inserted in this block does document's effective date on the Department of		statutory fili	ing requirements, th	is date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)			
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The num approval.	ber of votes	east for the amendu	neut(s)
☐ The amendment(s) was/were approved by the must be separately provided for each voting				
"The number of votes east for the ame	endment(s) was/were suff	ficient for ap	proval	
by Donna M.D.Au	oting group)	2-	·	
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors with	out sharehole	der action and sharel	holder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without sl	hareholder a	ction and sharehold	er
Dated SEPTE	TAIBER 25th	2017		
Signature (By a director, pre- selected, by an inc	esident or other officer corporator – if in the bandry by that fiduciary)	if directors o	or officers have not l	peen court
	TOONNA M. (Typed or printed name	DAW:	ening)	
	REGISTERED (Title of per	AGEN son signing	TP	