P17000069713

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _		. ESTATE REFERRALS (JE NW FLA, IN	il.
DOCUMENT NUMBER:	CUMENT NUMBER: P17000069773			
The enclosed Articles of Amenda	rent and fee are su	bmitted for filing.		14
Please return all correspondence c	oncerning this mat	tter to the following:		
		MISSY FLINCHUM		
	Name of Contact Person REAL ESTATE REFERRALS OF NW FLA, INC.			
	Firm/ Company POST OFFICE BOX 5533			
				1
 	Address			
DESTIN, FL 32540				
	City/ State and Zip Code			
	MARYANNE	@DESTIN-REAL-ESTAT	Е.СОМ	
E-mai	l address: (to be us	sed for future annual report	notification)	
For further information concerning	g this matter, pleas	e call:		
MARY ANNE WINDE	s	at (803-2211	
Name of Contact F	erson	Area Co	de & Daytime T	elephone Number
Enclosed is a check for the follow	ing amount made j	payable to the Florida Depa	irtment of State	
□ \$35 Filing Fee S43.	75 Filing Fee & ifficate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52,50 Fili Certificate Certified C (Additional is enclosed	of Status opy Copy
Mailing Addre Amendment Sec Division of Cor P.O. Box 6327 Tallahassee, FL	ction porations	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporation Building xecutive Center assec, FL 32301	Circle

Articles of Amendment to Articles of Incorporation of



REAL ESTATE REFERRALS OF NW FLA, INC.

(Name of	Corporation as currently	v filed with the Florida I	Dept. of State)	7
	P17000069	9773		THE CO.
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.13 its Articles of Incorporation.	006, Florida Statutes, this I	Florida Profit Corporatio	$m{n}$ adopts the following	; amendment(s) to
A. If amending name, enter the new nam	ne of the corporation:		11	
N/A				The new
name must be distinguishable and conta- "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Inc," or "C	Co". A professional cor		
B. Enter new principal office address, if applicable:		N/A		
(Principal office address <u>MUST BE A STI</u>				
				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		POST OFFICE BOX	5533	
		DESTIN, FL 32540		
D. If amending the registered agent and/or the new			name of the	
-	new registered agent and/or the new registered office address: CHARLES K. WINDES, JR.			
Name of New Registered Agent	787 SPRING LAKE DI	RIME		
-	iFlorida stre			
	DESTIN		32541	
New Registered Office Address:		(Сиу)	, Florida(Zip C	ode)
New Registered Agent's Signature, if cha				
I hereby accept the appointment as register	ed agent i am jamiliar w	an and accept the obliga	tions of the position.	
_ Chan	L. K. W	in ya		
	Signature of New Re	egistered Agent, if changi	ng	

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; V = 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: XChange	<u>14</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	<u>Sally Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P, S, T	MARY ANNE WINDES	787 SPRING LAKE DRIVE
Add			DESTIN, FL 32541
xxx Remove			
2) XXX Change	P, S, T	MELISSA A. FLINCHUM	296 STAHLMAN AVENUE
Add			DESTIN, FL 32541
Remove			
3) Change		_	
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			
Add		_	
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N/A	
· · · · · · · · · · · · · · · · · · ·	
	
3. If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itself	hares.
(if not applicable, indicate N/A) N/A	
-	

. . . .

The date of each amendment(s) adoption	:	, if other than the
date this document was signed.		, n valet man
Effective date if applicable:		
	(no more than 90 days after amendment fil	· date)
Note: If the date inserted in this block do document's effective date on the Departmen	ies not meet the applicable statutory filing requirent of State's records.	ements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☑ The amendment(s) was/were adopted by by the shareholders was/were sufficient	the shareholders. The number of votes cast for the approval.	amendment(s)
	y the shareholders through voting groups. The for tring group entitled to vote separately on the ame	
	amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adopted by action was not required.	the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopted by action was not required.	the incorporators without shareholder action and	sliareholder
DatedOctober 3	, 2017	
Signature /	0- 70-1	
	president or other officer – if directors or officers	have not been
	incorporator - if in the hands of a receiver, truste	e, or other court
appointed fidus	ciary by that fiduciary)	
	Melissa A. Flinchum	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	