## P17000081582

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATI	ON:REN	MAX LIFESTYLE REALT	Y, INC.
DOCUMENT NUMBER:	P17000081582		
The enclosed Articles of Art	nendment and fee are su	bmitted for filing.	
Please return all correspond	ence concerning this ma	tter to the following:	
		ERIC SOTOLONGO	
		Name of Contact Person	n
		Firm/ Company	
4564 SUMMER HAVEN BLVD SOUTH			SOUTH
	Address		
	JACKSONVILLE, FL 32258		
		City/ State and Zip Cod	e
	T	heREMAXLife@Gmail.co	m
	E-mail address: (to be us	sed for future annual report	notification)
For further information con-	cerning this matter, pleas	se call:	
Eric S	otolongo	at (	434-3800
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing 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)
Division of P.O. Box	ent Section of Corporations	Amend Division Clifton	Address  Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## REMAX LIFESTYLE REALTY, INC.

(Name	of Corporation as current	tly filed with the Florida D	ept. of State)
	P170000	081582	
	(Document Number of	of Corporation (if known)	* '
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation	n adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
LIFESTYLE REALTY & INVESTMEN	TS GROUP, INC		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corp	orporated" or the abbreviation
B. Enter new principal office address, (Principal office address MUST BE A S		N/A	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	
<del> </del>			
		<del></del>	
D. If amending the registered agent ar new registered agent and/or the ne			name of the
Name of New Registered Agent	N/A	_	
Name of New Registered Agent			
	(Florida st	reet address)	<del> </del>
	N/A	, cur adar uning	
New Registered Office Address:		(City)	, Florida (Zip Code)
		·	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	***************************************	<u></u>	ions of the nosition
Thereby, desept the appointment as regain	rerew agent. Tum jummar	with und decept the owngor	ions of the position.
	11.0		•
	1011	<u>†</u>	<u> </u>
	Signature of New 1	Registered Agent, if changi	18

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.

X Change	<u>PT</u>	John Doe		
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) N/A Change	N/A	N/A	N/A	
N/A Add				
N/A Remove				<u> </u>
2) N/A Change	N/A	N/A .	N/A	
N/A Add				
N/A Remove				
3) N/A Change	N/A	N/A		
N/A Add				
N/A Remove			<del></del>	
4) Change			<u></u>	
Add				
Remove				
5) Change			<del></del>	
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	
F. 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)	<b>.</b>
N/A	
	·

N/A	
The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
N/A Effective date if applicable:	
(no more	than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's reco	applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE	)
■ The amendment(s) was/were adopted by the shareholder by the shareholders was/were sufficient for approval.	s. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholde must be separately provided for each voting group entit	
"The number of votes cast for the amendment(s) w	as/were sufficient for approval
by	,,
by(voting group)	
☐ The amendment(s) was/were adopted by the board of direction was not required.	ectors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporate action was not required.	rs without shareholder action and shareholder
Dated10/12/17	
Signature Tuo,	Stationgo
	er officer - if directors or officers have not been
·	f in the hands of a receiver, trustee, or other court
appointed fiduciary by that fid	ıciary)
	ERIC SOTOLONGO
(Typed or p	rinted name of person signing)
	PRESIDENT
	(Title of person signing)

. . . . .