## P17000083685

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SOFLO HOME R	FALTY	
DOCUMENT NUMI	P17000083685		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	atter to the following:	
	ABEL LUCAS		
		Name of Contact Person	n
	SOFLO HOME REALTY		
	<del></del>	Firm/ Company	
	2881 E. OAKLAND PARK	. ,	
		Address	
	FORT LAUDERDALE, FL.		
		City/ State and Zip Cod	<u> </u>
		City/ State and Zip Cou	Ç
rlucas	@soflohome.com		
<u></u>	E-mail address: (to be u	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
ABEL LUCAS		at ( <u>954</u>	270-8131
Name of Contact Person		at ( Area Co	) de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 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)
<u>Mai</u>	ling Address	Street	Address
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

SOFLO HOME REALTY CORP

SOFIO HOWIE REALLY, CORE			
(Name of Corporation as curre	ntly filed with the Florida Dept	. of State)	_
P17000083685			
(Document Number	r of Corporation (if known)		_
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	nis Florida Profit Corporation ad	opts the following amendment(s)	to
A. If amending name, enter the new name of the corporation:			
N/A		The new	
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	r "Co". A professional corpora	rated" or the abbreviation	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	MIROUT IS AN 9:31 SECRETARY OF STAT TALLIAHASSEELFL	1: 17
D. If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre		ne of the	
Name of New Registered Agent	<del></del>		
New Registered Office Address:	street address)		
New Registerea Office Adaress: 151118	(City)	. Florida(Zip Code)	
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am familia	ent:  Ir with and accept the obligations  Revistered Agent, if changing		
Signature of New	c 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 = ChiefExecutive 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: $\underline{X}$ Change	<u>PT</u>	John Doe	
X Remove	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	D	LYNDA SOMERS DONAHUE	2881 E. OAKLAND PARK BLVD
XAdd			#222
Remove			FORT LAUDEREALE, FL 33306
2) Change	D	VIOLET ROSE	601 S. FEDERAL HWY
Add			#301
X Remove			BOCA RATON, FL 33432
3 ) Change			
Add			
Remove			
4) Change			
Add			<del> </del>
Remove			
5) Change			·
Add			
Remove			
6) Change			
Add	-		
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	
<del>-</del>	
<del></del>	
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and and an analysis of the angendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	<del></del>
<del>-</del>	
<del>-</del>	
<del></del>	

The date of each amendmen		, if other than the
date this document was signed Effective date <u>if applicable</u> :	OCTOBER 8, 2018	
- in application	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendatere sufficient for approval.	nent(s)
	ere approved by the shareholders through voting groups. The following stated for each voting group entitled to vote separately on the amendment(s)	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	ere adopted by the board of directors without shareholder action and share	eholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and sharehold	ler
OCT Dated	08, 2018	
Signature	A hel houng	
- () s	By a director, president or other officer – if directors or officers have not elected, by an incorporator – if in the hands of a receiver, trustee, or othe appointed fiduciary by that fiduciary)	
	ABEL LUCAS	
	(Typed or printed name of person signing)	
	Abel Luis (Prusident)	
	(Title of person signing)	