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| (Requestor's Name) |
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| (Address) |
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| PICK-UP WAIT MAIL |
| (Duel- de Falin Mana) |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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2018 JUL 16 PM 2: 07 SECRETARY OF LIAND TALLAHASSEL FLORIDA

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JUL 18 LOID I ALBRITTON:

COYER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR/ | ATION: OPPORTUNITY I | JS REALTY CORP | |
|--|---|---|--|
| DOCUMENT NUMBI | ER: P18000009773 | | |
| The enclosed Articles of | f <i>Amendment</i> and fee are su | bmitted for filing. | |
| Please return all corresp | ondence concerning this ma | tter to the following: | |
| N | IARCO REIS | | |
| _ | | Name of Contact Po | erson |
| U | SA TAX CORPORATION | I | |
| _ | | Firm/ Company | · |
| 5 | 91 E SAMPLE RD | | |
| _ | | Address | |
| Р | OMPANO BEACH FL 33 | 064 | |
| _ | | City/ State and Zip | Code |
| USATA | XX@USTAXFL.COM | | |
| | E-mail address: (to be us | sed for future annual re | port notification) |
| | · | | |
| For further information | concerning this matter, pleas | se call: | |
| MARCO REIS | | 954 at (| 788-1818 |
| Name of | Contact Person | Area | Code & Daytime Telephone Number |
| Enclosed is a check for | the following amount made | payable to the Florida I | Department of State: |
| S35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee Certified Copy (Additional copy is enclosed) | Certificate of Status |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | An Di Cli | reet Address condiment Section vision of Corporations from Building 61 Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| _ | | | | | | | | | |
|-----------|--------------|------------|-----|---------|--------|------|-----|--------|-----|
| $^{\sim}$ | \mathbf{o} | $1 \cap D$ | TIL | NHT | / I IC | RFAI | TV | \sim | חח |
| . , | | דוניו־ | 111 | 1 1 1 1 | 11.5 | REMI | 1 1 | | T 1 |

| (Name of Corporation as curre | ently filed with the Florida Dept. of State) |
|---|---|
| P18000009773 | |
| (Document Number | er of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation; | his Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | <u> </u> |
| | The _new |
| name must be distinguishable and contain the word "corpore "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," oword "chartered," "professional association," or the abbreviation | r "Co". A professional corporation name must contain the |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>) | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office address | |
| Name of New Registered Agent | |
| (Floride | a street address) |
| New Registered Office Address: | , Florida |
| | (City) (Zip Code) |
| New Registered Agent's Signature, if changing Registered Ag I hereby accept the appointment as registered agent. I am famili | |
| Signature of Ne | w 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 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: X Change | <u>PT</u> | John D | <u>oc</u> | |
|----------------------------|--------------|-------------|-----------------------|---------------------------|
| X Remove | <u>V</u> | Mike J | <u>ones</u> | |
| X Add | <u>sv</u> | Sally S | <u>mith</u> | |
| Type of Action (Check One) | <u>Title</u> | | <u>Name</u> | <u>Addres</u> s |
| 1) Change | Р | | ROBERTO MARIANO COSTA | 587 E SAMPLE RD SUITE 193 |
| Add | | | | POMPANO BEACH -FL-33064 |
| X Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | - | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | _ | | |
| Add | | | | |
| Remove | | | | |

| E. If amending or adding additional Artic (Attach additional sheets, if necessary). | | <u>, </u> | | | |
|--|---------------|--|-------------|---------------------------------------|-----|
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| F. If an amendment provides for an exchaprovisions for implementing the amer (if not applicable, indicate N/A) | | | | | |
| ROBERTO MARIANO COSTA HOLDS | 1000 SHARE | | | | |
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| • | 07/13/18 |
|---|--|
| The date of each amendment(s) a | doption:, if other than the |
| date this document was signed. | 13/18 |
| Effective date if applicable: | |
| | (no more than 90 days after amendment file date) |
| Note: If the date inserted in this document's effective date on the D | block does not meet the applicable statutory filing requirements, this date will not be listed as the partment of State's records. |
| Adoption of Amendment(s) | (CHECK ONE) |
| ■ The amendment(s) was/were ad by the shareholders was/were s | opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval. |
| | proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s): |
| "The number of votes cas | for the amendment(s) was/were sufficient for approval |
| by | (voting group) |
| | (voting group) |
| ☐ The amendment(s) was/were adaction was not required. | opted by the board of directors without shareholder action and shareholder |
| ☐ The amendment(s) was/were adaction was not required. | opted by the incorporators without shareholder action and shareholder |
| 07/13/18 Dated | • |
| Signature | 2 Cly of bol |
| (By a c | firector, president or other officer - if directors or officers have not been |
| | ed, by an incorporator – if in the hands of a receiver, trustee, or other court ated fiduciary by that fiduciary) |
| | FABIOLA LIMA DUZOGLOU |
| | (Typed or printed name of person signing) |
| | DIRECTOR |
| | (Title of person signing) |