P18000063136

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CODIO		ESTATE GROUP INC.			
NAME OF CORPO	P18000063736				
DOCUMENT NUM					
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	GARCIA, FRANCISCO				
	Engel & Voelkers Fort Laud	Name of Contact Person erdale	1		
	2017 Bayview Dr.	Firm/ Company			
	Fort Lauderdale Florida 333	Address 05			
		City/ State and Zip Cod	e		
Fran	ncisco.garcia@engelvoctkers.c	om			
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
Francisco Garcia		561 at (722-8905)	5	35 25 37
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	JUN -5	55 55 52 55 52 57 52 57
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)	PM 5: 28	GE STATE SE GRATIONS

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

GARCIA REAL ESTATE GROUPING.

(Name of Corporation as currently P18000063736	filed with the Florida Dept. of State)		
(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the followin	g amer	idment(s)
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or "C word "chartered." "professional association," or the abbreviation ".	To". A professional corporation name must P.A."		ution
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	3301 N Ocean Blvd. Fort Landerdale Fl 33308		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3301 N Ocean Blvd. Fort Landerdale Ft 33308		<u>.</u>
		19	
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:		-S P#	ACT OF S
Name of New Registered Agent		5: 28	STATE
(Florida stre	et address)	_	S)
New Registered Office Address:(City) , Florida (Zip	Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	with and accept the obligations of the position.		
Signature of New Ro	egistered 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:	ive, ana sai	uy Sman, Sv as an Aaa.	
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)	<u>Title</u>	Name	Address
	C	Ree Cole	3020 NE 32nd Ave. #1517
1) Change		_	Fort Lauderdale Fl 33308
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Channa			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. Tital in death with the tart of receipted syr	ticles, enter change(s) here: . (Be specific)
	
-	
	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 applicable statutory filing requirements, this date wil document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
5/31/2019	
Signature Manual June	
(By a director, president or other officer—if directors or officers have not been selected, by an incorporator—if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
Margot Garcia	
(Typed or printed name of person signing) Vice President	
(Title of person signing)	