P18000099882

(Requestor's Name)	
(Address)	300333114133
(Address)	300333114133
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	09/18/1901825013 *+10.88
(Business Entity Name)	
(Document Number)	08/21/1901014020 ++25.00
Certified Copies Certificates of Status	S TALLENT
	SEP 1 9 2019
Special Instructions to Filing Officer:	
	2019 SEP 16 AM
Obes \$10.00	twer = == == == == == == == == == == == ==

Office Use Only

AM 8: 34



August 30, 2019

NGHIA NGUYEN NGHIATAX LLC 2031 NW 40TH AVE COCONUT CREEK, FL 33066

SUBJECT: CENTRO REALTY GROUP INC

Ref. Number: P18000099882

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a FLORIDA LIMITED LIABILITY COMPANY, but your entity is a FLORIDA CORPORATION. Please complete and return the enclosed blank form(s).

THERE IS AN ADDITIONAL FILING FEE OF \$10.00 DUE. L14000161676

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L14000161676.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 419A00018027

COVER LETTER

--

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CENTRO REALT	Y GROUP INC			
DOCUMENT NUMI	P18000000887				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	ter to the following:			
	NGHIA NGUYEN				
		Name of Contact Persor	1		
	NGHIATAX LLC				
		Firm/ Company			
	2031 NW 40th AVE				
		Address			
	COCONUT CREEK, FL 330	066			
	City/ State and Zip Code				
finen	guyen@gmail.com		/		
		sed for future annual report	notification)		
For further informatio	n concerning this matter, pleas	se call:			
NGHIA NGUYEN		at (9948005		
Name of Contact Person		Area Code & Daytime Telephone Number			
Enclosed is a check for	r the following amount made p	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)		
Amo Div P.O	iling Address endment Section ision of Corporations . Box 6327 abassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

CENTRO REALTY GROUP INC.

CENTRO REALTY GROUP INC	
(Name of Corporation as current)	filed with the Florida Dept. of State)
P18000099882	 -
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
CENTRO REALTY GROUP CORP	
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "(word "chartered," "professional association," or the abbreviation ")	Co". A professional corneration name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	201
	2.4 SO PEGE
C. Enter new mailing address, if applicable:	· 5
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
	<u> </u>
D. If amending the registered agent and/or registered office addre	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	we will the many of the
Name of New Registered Agent	
(Florida stree	et address)
New Registered Office Address:	
· · · · · · · · · · · · · · · · · · ·	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar wi	ith and accept the obligations of the position.
Signature of Vero Pa	gistered Agent, if changing
Signature by Hew Key	Sweren 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.

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	<u>Addres</u> s
1) X Change	VP	NGHIA NGUYEN	2031 NW 40TH AVE
Add			COCONUT CREEK, FL 33066
Remove			
2) X Change	Р	HO VAN HO	4875 KENSINGTON CIR
Add			CORAL SPRINGS, FL 33076
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			•
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attac	ending or adding a h <i>additional sheets</i> ,	, if necessary). (Be specific)	<u></u>			
	<u>. </u>						
	<u></u>						
			<u></u>				
						<u></u>	
							
		•	<u>-</u>				
							
							
prov	amendment provi visions for implem (if not applicable, i	enting the amend	ge, reclassificat ment if not cont	ion, or cancella ained in the am	tion of issued sha endment itself:	ares,	
							
. <u>-</u>							
_						· · · · · · · · · · · · · · · · · · ·	_
					 		

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 we document's effective date on the Department of State's records.	rill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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.	
09/11/2019	
Signature 19 h My	
(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)	.
NGHIA NGUYEN	
(Typed or printed name of person signing)	
VP	

(Title of person signing)