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(Re	equestor's Name)	
(Ac	ldress)	
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UNISHEN OF CORPORATIONS

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COVER LETTER

Tallahassee, FL 32314

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		<u>COVER LETTER</u>		
TO: Amendment Secti Division of Corpo				Inc 1
NAME OF CORPOR	varion: Ali Real	Estate Prope	rty Investments	Inc "13"
DOCUMENT NUME	BER: _ P 1900000(1016	·	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	James	ca Shacketton	1	
		Name of Contact Person	1	
	in a	Firm/ Company		
	1361 1	errale kd. Address		
	Cleane	ater, FL 33	155	
	<u></u>	City/ State and Zip Cod		
	<u> Alirealestati</u> E-mail address: (to be us	Li AvestMents e c	notification)	
For further information	n concerning this matter, pleas	se call:		
	a Shackelford		, 348-8554	
Name o	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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ling Address ndment Section		Address Iment Section	
Divis	sion of Corporations	Divisio	on of Corporations	
P.O. Box 6327 Clifton Building				

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently	filed with the Florida Dept. of State)
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	Itorida Profit Corporation adopts the following amendment(s) to
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 "Coword "chartered," "professional association," or the abbreviation "I	'o" 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)	Po Box 14 Clearwater, Fl 33757
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	1
1361 Terro	
New Registered Office Address: Cuaruxtur	22-6
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.

Sygnature of New 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 Doc	
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
i) Change	\bigvee	Socol A. Williams	1504 S. MIK Jr. Ave.
Add			Clearunder FL 33755
Remove			
2) Change Add	7	Jamieka M. Shackelfo	rd 1361 Terrace RJ. Clearwater. Fr. 33755
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change			
Add			
Domovo			

Attach additiona	dding additional Artic sheets, if necessary).	(Be specific)	ciol nere.			
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fan amandmar	mandalan faman ayah				L	
<u>r an amenumen</u> provisions for i	provides for an exchapplementing the amen	ange, reciassine idment if not co	<u>ation, or cancell</u> ntained in the a	<u>ation of issued s</u> mendment itself:	nares,	
(if not appli	able, indicate N/A)	Market Market	THE U.	are ment a reserve	<u>.</u>	
						
						
						

The date of each amendment(s) adoption:	419, if other than the
late this document was signed.	
Effective date if applicable: 10/20/19	
(no more the	n 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicament's effective date on the Department of State's record.	plicable 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 shareholders, by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders must be separately provided for each voting group entitled	through voting groups. The following statement to vote separately on the amendment(s):
"The number of votes east for the amendment(s) was	/were sufficient for approval
by	<u> </u>
(voting group)	
The amendment(s) was/were adopted by the board of direct action was not required.	tors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required.	without shareholder action and shareholder
Dated 10 20 19	
Dated 10 20 19 Signature Xilled Wille	1
(By a director, president or other	officer – if directors or officers have not been
selected, by an incorporator – if appointed fiduciary by that fiduc	in the hands of a receiver, trustee, or other court
Sacred A. W	lliams
(Typed or prin	nted name of person signing)
President	Title of person signing)
	itle of person signing)