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| PICK-UP WAIT MAIL                          |
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| Special Instructions to Filing Officer:    |
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FLORIDA RESEARCH & FILING SERVICES, INC.

1211 CIRCLE DR

TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED AMENDMENT FOR:

REALTOR RESOURCE NETWORK INCORPORATED

PLEASE RETURN A STAMPED COPY

CHECK# 8489 FOR: \$35.00

THANK YOU!

## **COVER LETTER**

TO: Amendment Section Division of Corporations

| NAME OF CORPORATION: MING   | itemen Sign + Post INC   |  |  |  |  |  |
|---|--|--|--|--|--|--|
| DOCUMENT NUMBER: P190000 H921   |  |  |  |  |  |  |
| The enclosed Articles of Amendment and fee are submitted for filling.                           |  |  |  |  |  |  |
| Please return all correspondence concerning this matter to the following:                       |  |  |  |  |  |  |
| Jos   | Name of Contact Person   |  |  |  |  |  |
| Firm/ Company   |  |  |  |  |  |  |
| 7915 103 ST 1-206  Address  JACKSONVILLE, FL 32210  City/ State and Zip Code                    |  |  |  |  |  |  |
| ) Acres   | Address El 37710   |  |  |  |  |  |
|   | City/ State and Zip Code   |  |  |  |  |  |
| E-mail address: (to be used for future annual report notification)                              |  |  |  |  |  |  |
| For further information concerning this matter, p   | please call:   |  |  |  |  |  |
| Jose Marguel Name of Conject Person   | at ( 205 ) 532 - 1858  Area Code & Daytime Telephone Number  |  |  |  |  |  |
| Enclosed is a check for the following amount made payable to the Florida Department of State:   |  |  |  |  |  |  |
|   |  |  |  |  |  |  |
| \$35 Filing Fee   |  |  |  |  |  |  |
| Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314 | Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 |  |  |  |  |  |

Tallahassee, FL 32303

## Articles of Amendment to

## Articles of Incorporation of

| Minutem  | ien_                    | Sign                   | and                | Poss         | , NC.         |              | 2519 (101     | 26    | AH     | 9: 3     |
|--|-------------------------|------------------------|--------------------|--------------|---------------|--------------|---------------|-------|--------|----------|
| (Name of C   |                         |                        |                    |              |               | t. of State  | 2)            |       |        | _        |
|  | P١                      | 9000                   | 0 119              | 21           |               |              |               |       |        | <u>.</u> |
|  | (Docume                 | ent Number             | of Cor             | oration (if  | known)        |              |               |       |        |          |
| Pursuant to the provisions of section 607.100 its Articles of Incorporation:   | 6, Florida              | Statutes, th           | is <i>Floric</i>   | la Profit Co | orporation a  | dopts the f  | following am  | endm  | ent(s) | to       |
| A. If amending name, enter the new name  | of the cor              | poration:              |                    |              |               |              |               |       |        |          |
| REALTI   | OR R                    | E SOUR                 | .cé                | NETW         | ORK 1         | NORING       | RA NOD The    | ' nev | ν,     |          |
| name must be distinguishable and contain the "Inc.," or Co.," or the designation "Corp "chartered." "professional association," or the contact of the contac | word "cor<br>o," "Inc," | poration,"<br>or "Co". | '''compo<br>A proj | nv," or "in  | corporated`   | " or the ubl | breviation "C | orp.  |        |          |
| B. Enter new principal office address, if a (Principal office address MUST BE A STRE   |                         | <u>RESS</u> )          | _                  |              |               | <del></del>  |               |       |        |          |
|  |                         |                        |                    |              |               |              |               |       |        |          |
| C. Enter new mailing address, if applicab<br>(Mailing address MAY BE A POST OF)  |                         | o                      |                    |              |               |              |               |       |        |          |
| ·  |                         |                        | _                  |              |               |              |               |       |        |          |
| <ul> <li>If amending the registered agent and/or<br/>new registered agent and/or the new re</li> </ul>   |                         |                        |                    | Florida, e   | nter the na   | me of the    |               |       |        |          |
| Name of New Registered Agent   |                         | ·                      |                    |              |               |              |               |       |        |          |
|  | <del>.</del>            | (Florida               | street add         | iress)       |               | <del></del>  | <del></del>   |       |        |          |
| New Registered Office Address:   |                         |                        |                    |              |               | , Florida    |               |       |        |          |
|  |                         | (Ciry)                 |                    |              |               | (Zip Code)   |               |       |        |          |
|  |                         |                        |                    |              |               |              |               |       |        |          |
| New Registered Agent's Signature, if chan I hereby accept the appointment as registered  |                         |                        |                    | nd accept th | he obligation | ns of the po | osition.      |       |        |          |
|  | c.                      | C11                    | n :                |              | it chanoino   |              |               |       |        |          |

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 Doe  |                 |
|--|----------------------------------|---|-----------------|
| 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 |
| 1) Change  |                                  |   |                 |
| Add  |                                  |   | <del></del>     |
| Remove   |                                  |   |                 |
| 21 Change  | <del></del>                      |   |                 |
| Add  |                                  |   |                 |
| Remove Change                                      |                                  |   |                 |
| Add  |                                  |   |                 |
| Remove   |                                  |   |                 |
| 4) Change  |                                  |   |                 |
| Add  |                                  |   |                 |
| Remove   |                                  |   |                 |
| 51 Change  |                                  |   |                 |
| Add  |                                  |   |                 |
| Remove   |                                  |   |                 |
| 6) Change  |                                  |   |                 |
| Add  |                                  |   |                 |
| Remove   |                                  |   |                 |
|  |                                  | Page 2 of 4   |                 |
| E. If amending or addin<br>(Attach additional shee | <u>e additio</u><br>ets, if nece | onal Articles, enter change(s) here: essary). (Be specific) |                 |

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| F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A) |                    |
|   |                    |
|   | ******             |
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| Please Add EIN # 84-3078564   |                    |
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| D 2-64  |                    |
| Page 3 of 4   |                    |
| The date of each amendment(s) adoption:   | , if other than th |
| 1. 1. 10  |                    |
| Effective date if applicable: 11/26/2019 (no more than 90 days after amendment file date)   | <del></del>        |

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

1 1 4 1 1 1 1 1 1 1 1

| Adoption of Amendment(s)   | (CHECK ONE)  |  |
|--|--|--|
| ☐ The amendment(s) was/were adop<br>by the shareholders was/were suf |  | The number of votes cast for the amendment(s)  |
|  |  | s through voting groups. The following statement d to vote separately on the amendment(s): |
| "The number of votes cast f  | or the amendment(s) was  | s/were sufficient for approval   |
| by   |  | <u> </u>   |
| •  | (voting group)   |  |
| ☐ The amendment(s) was/were adopaction was not required.             | oted by the board of direc                                     | ctors without shareholder action and shareholder   |
| The amendment(s) was/were adopaction was not required.               | oted by the incorporators                                      | without shareholder action and shareholder   |
| Dated 11 / 20  | 119  | - Öl   |
| Signature  | and In   | 1  |
| · (By a dif  | , .  | officer - if directors or officers have not been   |
|  | by an incorporator – if it it is a siduciary by that fiduciary | in the hands of a receiver, trustee, or other court iary)                                  |
|  | Jose   | Manguel  sted name of person signing)  |
|  | (Typed or prin   | nted name of person signing)   |
| _  | owner /p   | resident / CEO   |
| (  | Title of person signing)                                       |  |