

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: MARLO ONE CORPORATION

DOCUMENT NUMBER: P19000022515

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVID DWECK
Name of Contact Person
SOUTHEAST REGIONAL REALTY CORPORATION
Firm/ Company
3600 S STATE ROAD 7, STE 228
Address
MIRAMAR, FL 33023-5203
City/ State and Zip Code

DAVID@SRRRCORP.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DAVID DWECK at (305) 848-5692
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

MARLO ONE CORPORATION

2019 OCT -4 PM 12:28

(Name of Corporation as currently filed with the Florida Dept. of State)

P19000022515

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ *The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

B. Enter new principal office address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

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 address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 will not be listed as the document's effective date on the Department of State's records.

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.

OCTOBER 3, 2019
Dated _____

Signature _____


(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)

DAVID DWECK

(Typed or printed name of person signing)

SECRETARY/TREASURE VIA POA

(Title of person signing)

Limited Power of Attorney

LIMITED POWER OF ATTORNEY
(With durable provision)

TO ALL PERSONS, be it known that I,

Maria Lopez

As grantors do hereby make and grant a limited specific power of attorney to Southeast Regional Realty Corporation, and appoint and constitute as my attorney-in-fact.

My named attorney-in-fact shall have full power and authority to undertake, commit and perform only the following acts on my behalf to the same extent as if I had done so personally, all with full power of substitution and revocation in the presence:

1. To, on my behalf, secure licenses necessary for renting my property MARLO ONE CORPORATION, 426 50th Street West Palm Beach, Florida 33407. Sign leases, lead based paint disclosures and other addenda.
2. To file legal actions on my behalf such as evictions
3. To make whatever acts are necessary to manage and maintain my property

The authority granted shall include such incidental acts as are necessary to carry out and perform the specific authorities and duties stated or contemplated herein.

My attorney-in-fact agrees to accept this appointment subject to its terms, and agrees to act and perform in said fiduciary capacity consistent with my best interest as he in his discretion deems advisable, and I thereupon ratify all facts so carried out.

I agree to reimburse my attorney-in-fact all reasonable cost and expenses incurred in the fulfillment of the duties and responsibilities enumerated herein.

Special durable provisions

This power of attorney shall constitute in full force and effect until revoked by subsequent writing

Other terms: Southeast Regional Realty Corporation will collect and distribute rents, deposits and any other tenant related forms or documents

Signed in the presence of:

William L Hill
Witness

Rosaline Vargas
Witness

Maria Lopez
Grantor-Owner

5/3/2019
Today, the _____