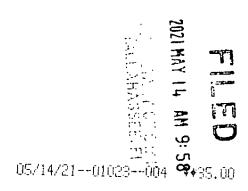
P21000009887

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer

Office Use Only



500366270375



RECEIVED

2021 MAY 14 PH 1:49

ALLAHASSEE, FLORID

Munuchs

MAY 17 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	Esquire Realtor, h	ne.	
DOCUMENT NUM	P21000009887 BER:		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Alisha Moriceau		
	Your Esquire Realty, Inc.	Name of Contact Perso	n
	2607 SW 13th Court	Firm/ Company	
	Fort Lauderdale, FL 33312	Address	
		City/ State and Zip Cod	c
	AMORICEAU@YOUR-ES	QUIRE-REALTY.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call:	
Alisha Moriceau		813 at (735-4769
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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		Amend Divisio The Co	Address ment Section of Corporations entre of Tallahassee V. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

ESQUIRE REALTOR, INC.

P21000009887	rently filed with the Flori	ida Dept. of State)
(Document Numb	per of Corporation (if knov	wn)
Pursuant to the provisions of section 607.1006. Florida Statutes, ts Articles of Incorporation:	this Florida Profit Corpor	ration adopts the following amendment(s)
A. If amending name, enter the new name of the corporation Your Esquire Realty, Inc.	<u>n:</u>	
name must he distinguishable and contain the word "corporation" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "I	". A professional corpor	
B. Enter new principal office address, if applicable:		29
Principal office address <u>MUST BE A STREET ADDRESS</u>)		2 7
		# 1
		(Margarith)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
(muning address MACHI. A TOST OF FICE BOA)		
		<u>,21% </u>
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 add		
Name of New Registered Agent		
(Floria	la street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Ag	vent:	
hereby accept the appointment as registered agent. I am famil		ligations of the position.
Signature of Ne	rw Registered Agent, if cha	inging
Check if applicable		
лись и аррисание		

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			
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change		<u> </u>	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets	s, if necessary).	(Be specific)				
			<u>.</u>			
<u>-</u> -						
						
<u>. </u>						
		· · · <u>-</u>	·			_
•						
an amendment prov	ides for an exch	iange, reclassific	ation, or cancella	ation of issued	snares,	
orovisions for implem (if not applicable,	indianta MAN	nament ii not co	ntained in the ai	menament usei	11.	
(у посаррисание,	inaicaie (v/n)					
				-		
						
	· 					
						<u>,</u>

.

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file	
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing require pepartment of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	lopted by the incorporators, or board of directors without s	hareholder action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes east for t sufficient for approval.	he amendment(s)
☐ The amendment(s) was/were a must be separately provided for	proved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame	ollowing statement ndment(s):
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
_{Dated} May 13	, 2021	
Signature C	ann	
(By a select	director, president or other officer – if directors or officers ed, by an incorporator – if in the hands of a receiver, trustented fiduciary by that fiduciary)	
	Alisha Moriceau	
	(Typed or printed name of person signing) Officer/Director	
	(Title of person signing)	<u> </u>