(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: JAZMIN NUNEZ	REALTOR PA		
	IBER: P21000011223			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	atter to the following:		
	JAZMIN NUNEZ			
		Name of Contact Person	n	
	PRESIDENT			
		Firm/ Company		
	1625 SE 10TH AV APT 501			
		Address		
	FORT LAUDERDALE, FL	33316		
		City/ State and Zip Cod	e	
	JAZMIN_NUNEZ@HOTM	AII COM		
		sed for future annual report	natification	
For further informati JAZMIN NUNEZ	on concerning this matter, plea	se call: at (at (
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check t	for the following amount made	payable to the Florida Dep.	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 Fec Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
	nendment Section	Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee		
	llahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

JAZMIN NUNEZ REALTOR PA	
(<u>Name of Corporation as curre</u> P21000011223	ently filed with the Florida Dept. of State)
	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	<u>u</u>
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.	'. A professional corporation name must contain the word
3. 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 <u>MAY BE A POST OFFICE BOX</u>)	FILED SECRETARION STATE WILL ANALYSEE LOSSE
 If amending the registered agent and/or registered office a new registered agent and/or the new registered office addr 	
Name of New Registered Agent	
(Florida	a street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Aghereby accept the appointment as registered agent. I am familia	
Signature of New	w Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Remove Y Mike Jones X Add SV Sally Smith Type of Action Title Name Address Change	X Change	<u>PT</u>	John Do	<u>c</u>	
Type of Action (Check One) Title Name Address 1) Change	X Remove	<u>V</u>	Mike Jos	ne <u>s</u>	
(Check One) 1) Change	X Add	<u>SV</u>	Sally Sm	nith_	
		<u>Title</u>		Name	Address
	l) Change		_		
2)Change	Add				
	Remove				
Remove	2) Change		_		
Add	Add				
Remove	Remove Change		_		
4) Change	Add				
Add	Remove				
Remove	4) Change		_		
5) Change	Add				
Add	Remove				
Remove	5) Change		_		
Remove	Add				
Add					
Add			_		
			_		
	Remove				

	(Be specific)			
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an amendment provides for an exch	ange, reclassification	i, or cancellation of i	ssued shares,	
	ndment if not contain	ned in the amendmer	<u>ıt itself:</u>	
orovisions for implementing the ame				
orovisions for implementing the ame (if not applicable, indicate N/A)				
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provisions for implementing the ame (if not applicable, indicate N/A)				

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01/01/2024 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 incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ 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 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)