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2021 HAR 12 PM 2:55 SECRETARY OF STATE

A. Butter

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>Raquel Prime Realty, P.A.</u> DOCUMENT NUMBER: P21000013438
DOCUMENT NUMBER: P2/000013438
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Paquel Martinez Name of Contact Person
Name of Contact Person
Firm/ Company
4648 NW, 90th avenue Address
Suncise FL. 33351 City/ State and Zip Code
City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (786) 210-9966 Area Code & Daytime Telephone Number
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:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

(Name of Co	rporation as curren	tly filed with the Florida	12021 HARLAIZ PH 2: 55
P210	13438		SECRETARY OF STATE
		of Corporation (if known)	
Pursuant to the provisions of section 607.1006 its Articles of Incorporation:	, Florida Statutes, this	s Florida Profit Corporat	ion adopts the following amendment(s)
A. If amending name, enter the new name	of the corporation:		
0) Δ.	Th
name must be distinguishable and contain the v "Inc.," or Co.," or the designation "Corp, "chartered," "professional association," or the	vord "corporation," " "Inc," or "Co".	"company," or "incorpora A professional corporat	The _ new ated" or the abbreviation "Corp.," ion_name_must_contain_the_word
B. Enter new principal office address, if ap (Principal office address <u>MUST BE A STRE</u>		N/A	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF	e <u>:</u> ICE BOX)	N/4	
D. If amending the registered agent and/or new registered agent and/or the new reg			e name of the
Name of New Registered Agent	/A		-
		···	
	(Florida si	(reet address)	
New Registered Office Address:		(City)	, Florida
		iC iùi	(Zip Code)
New Registered Agent's Signature, if chang			
I hereby accept the appointment as registered	ageni i am jamuiar	with and accept the onlig	ations of the position.
	6		
	Signature of New I	Registered Agent, if chang	nng
Check if applicable ☐ The amendment(s) is/are being filed pursua	nt 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.

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			·
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ing additional Art neets, if necessary).	(Be specific)			
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an amendment pr	rovides for an exc	hange, reclassific	ation, or cancella	tion of issued sh	ares,
provisions for imp	iementing the amo le, indicate N/A)	<u>andment if not co</u>	intained in the ar	nendment itself:	
	,				
N/A		-			
• • •					
					
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	411			-	

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	option:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment fu	
	(no more than 90 days after amendment fu	le date)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing requipartment of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for fficient for approval.	the amendment(s)
	roved by the shareholders through voting groups. <i>The feach voting group entitled to vote separately on the amo</i>	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated03 /	05/2021 ayul m	
Signature 7	anul m	
(By a di selectec	rector, president or other officer – if directors or officers, by an incorporator – if in the hands of a receiver, trusted fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	Directur (Title of person signing)	······································