P21000020407

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Cityrs	state/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fil	ing Officer:	

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SECRETARY OF STATE
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COVER LETTER

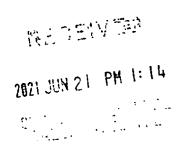
TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: Miguel Scott Realt	y PA		
	IBER: P21000020407			
	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	Miguel Scott			
		Name of Contact Person	1	
		Firm/ Company		
	10321 SW 137th Ct			
	Miami FL 33186	Address		
		City/ State and Zip Code	е	
	miguelscott25@gmail.com			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Miguel Scott		at (305	283-8633	
Name	of Contact Person	at (305) 283-8633 Area Code & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:	
□ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE Division of Corporations



May 20, 2021

MIGUEL SCOTT 10321 SW 137TH CT MIAMI, FL 33186 US

SUBJECT: MIGUEL SCOTT REALTY, PA

Ref. Number: P21000020407

We have received your document for MIGUEL SCOTT REALTY, PA and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed 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.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 521A00010691

Articles of Amendment to Articles of Incorporation of

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(Name of Corpo	oration as currently filed with the Florida Dept. of State
121000020407	TATE TO TO TOTAL
(De	ocument Number of Corporation (if known) ALL AHASSEE, FL.
Pursuant to the provisions of section 607.1006, Flors Articles of Incorporation:	lorida Statutes, this Florida Profit Corporation adopts the following amendment
. If amending name, enter the new name of the	he corporation:
figuel Scott PA	
ame must be distinguishable and contain the word lnc.," or Co" or the designation "Corp." "I chartered," "professional association," or the ad	d "corporation," "company," or "incorporated" or the abbreviation "Corp.," Inc," or "Co". A professional corporation name must contain the word abbreviation "P.A."
Enter new principal office address, if applications of the principal office address MUST BE A STREET A	ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	BOX)
If amending the registered access to	
If amending the registered agent and/or reginew registered agent and/or the new register	istered office address in Florida, enter the name of the red office address:
new registered agent and/or the new register	istered office address in Florida, enter the name of the red office address:
If amending the registered agent and/or reginew registered agent and/or the new register Name of New Registered Agent	istered office address in Florida, enter the name of the red office address:
new registered agent and/or the new register	red office address:
Name of New Registered Agent	istered office address in Florida, enter the name of the red office address: (Florida street address)
new registered agent and/or the new register	red office address:

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 (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 = ChiefExecutive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held.

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, Example:

X Change	<u>PT</u>	John Doc	
X Remove	<u>V</u>	Mike Jones	
\underline{X} Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
I) Change	D	_ Julia Durham	10271 Cm 1274 01
X Add			10321 SW 137th Ct Miami, FL 33186
Remove			WIWIN, FL 33180
2) Change		_	
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach <i>additional sl</i> :	ing additional Art eets, if necessary).	(Be specific)	nge(s) nere.			
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an amendment nee	uidaa famaa		_			
an amendment pro	menting the amen	<u>nge, reclassific</u> dment if not co	ation, or cane	ellation of issu	ed shares,	
(if not applicable	indicate N/A)	The state of the s	intallica in the	amenument n	<u>sei1:</u>	
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The date of each amendment(3/24/2021	
date this document was signed.	s) adoption:	, if other than the
	3/24/2021	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
☐ The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following statemen for each voting group entitled to vote separately on the amendment(s):	ı
"The number of votes o	ast for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
3/24/201 Dated	21	
Signature <u>Y</u>	11411	
sele	director president or other officer – if directors or officers have not been cled, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)	
	Miguel Scott	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	-