07/22/2021

Division of Corporations

(FAX)

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(((H21000280057 3)))



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To: Division of Corporations Fax Number

: (850)617-6380

From:

: GREENE HAMRICK SCHERMER & JOHNSON, P.A. Account Name

Account Number : I19990000030 Phone : (941)747-1871 Fax Number : (941)745-2866

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN ANNA MARIA ISLAND LIFE REAL ESTATE, P.A.

Certificate of Status	0
Certified Copy	0
Page Count	95
Estimated Charge	\$35.00

Artic	ticles of Amendment to cles of Incorporation of scurrently filed with the Florida Dept. of State)
Anna Maria Island Life Real Estate, P.A.	The second secon
	s currently filed with the Florida Dept. of State)
P21000051451	
(Document I	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ration:
N/A	The new
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	ration," "company," or "Incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRES	N/A
C. Enter new mailing address, if applicable; (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	iffice address in Florida, enter the name of the e address:
Name of New Registered Agent N/A	
a	Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered hereby accept the appointment as registered agent. I am j	ed Agent: familiar with and accept the obligations of the position.
Signature o	of New Registered Agent, if changing

Check if applicable

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

Example:

If smending 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>S</u> Y	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P/D	Suzanne Korinek	9908 Gulf Drive, Suite E
X Add			Anna Marie, Fl. 34216
Remove			
2) Change			
Add			
Remove Change			
Add			
Remove			
4) Change	_		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	r adding additional nal sheets, if necessa	ry). (Be specific)			
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provisions for	ent provides for an implementing the blicable, indicate N/A	amendment if not	(Ication, or cancell contained in the a	ation of issued sha mendment itself:	res.
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-					 ,

The date of each amendment(s) ad	loption:	, if other t	han 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 bl document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date wipartment of State's records.	ll not be listed	i as the
Adoption of Amendment(s)	(CHECK ONE)		
■ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action an	d sharcholder	
☐ The amendment(s) was/were ado by the shareholders was/were sur	pted by the shareholders. The number of votes cast for the amendment(s) [Ficient for approval.		
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	1	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	>	2021 JUL 22 AM
by	,,	3× 3.	JU.
,	(voling group)	7. 20.00 17.)L 22
		[i]	2 :
July 21, 202	ζ	- <u> </u>	3
Dated		デンタ 102 ml ml	ب
a:		200	: 07
Signature By Adi	ector, president or other officer - if directors or officers have not been		~-J
	, by an incorporator – if in the hands of a receiver, trustee, or other court		
	d fiduciary by that fiduciary)		
1	Robert W. Hendrickson, III		
-	(Typed or printed name of person signing)		
1	ncorporator		
-	(Title of person signing)		