| (Requestor's Name) | |
|---|--|
| (Address) | 900368905 |
| (Address) | |
| (City/State/Zip/Phone #) | , |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | 07/13/21010240 |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPO | RATION: PEDRO GOMEZ | REALTY & ASSOC INC | | |
|--|--|--|--|--|
| DOCUMENT NUM | P21000058174 | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | |
| Please return all corre | espondence concerning this ma | tter to the following: | | |
| | PEDRO GOMEZ | | | |
| | | Name of Contact Persor | 1 | |
| | PEDRO GOMEZ REALTY & ASSOC INC | | | |
| | | Firm/ Company | | |
| | 9735 NW 52ND ST APT 418 | 8 | | |
| | | Address | | |
| | DORAL, FL 33178 | | | |
| | | City/ State and Zip Code | | |
| | pedrogomezappraisals&gmai | iLeom | | |
| | • • | sed for future annual report | notification) | |
| | | | | |
| For further information | on concerning this matter, plea | se call: | | |
| PEDRO GOMEZ | | 305 | de & Daytime Telephone Number | |
| Name | of Contact Person | Area Co | de & Daytime Telephone Number | |
| Enclosed is a check f | or the following amount made | payable to the Florida Depa | artment of State: | |
| S35 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

Articles of Amendment to Articles of Incorporation of

PEDRO GOMEZ REALTY & ASSOCINC

| (Name of Corporation as curren | tly filed with the Florida Dept. of State) | · · · · · · · · · · · · · · · · · · · |
|---|--|---------------------------------------|
| P21000058174 | | |
| (Document Number | of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation: | s Florida Profit Corporation adopts the fol | lowing amendment(s) t |
| A. If amending name, enter the new name of the corporation: | | |
| N/A | | The new |
| 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. | A professional corporation name must c | eviation "Corp.," |
| B. Enter new principal office address, if applicable: | PEDRO GOMEZ | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | 9735 NW 52ND ST APT 418 | |
| | DORAL, FL 33178 | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | N/A | 202 |
| D. If amending the registered agent and/or registered office ad- | | 13 PH 12: 45 |
| new registered agent and/or the new registered office addres | <u>ss:</u> | - |
| Name of New Registered Agent N/A | | |
| t El wida e | treet address) | |
| | | |
| New Registered Office Address: | , Florida | (Zip Code) |
| | | · |
| New Registered Agent's Signature, if changing Registered Agen | | |
| Thereby accept the appointment as registered agent. I am familiar | with and accept the obligations of the posi- | ition. |
| | | |
| Sedist | | |
| Signifyure 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.

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> <u>John</u> | <u>1 Doe</u> | |
|----------------------------|------------------------|--------------|-------------------------|
| X Remove | <u>V</u> <u>Mik</u> | e Jones | |
| <u>X</u> Add | <u>SV</u> <u>Sally</u> | v Smith | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s |
| 1) Change | P | PEDRO GOMEZ | 9735 NW 52ND ST APT 418 |
| X Add | | | DORAL, FL 33178 |
| Remove | | | |
| 2) Change | | | |
| Add | | | |
| Remove 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 51 Change | | | |
| Add | | | |
| Remove | | | |
| 6) Change | . | | |
| Add | | | |
| Remove | | | |

| / s | al sheets, if nece | ssary), (Be spec | <i>y</i> . | | | |
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| If an amendme | nt provides for | an exchange, rec | lassification <u>, or g</u> | an <u>cellation of iss</u> | ued shares, | |
| provisions for | implementing | the amendment if MA) | not contained in | the amendment | <u>itself:</u> | |
| (if not app | licable, indicate | N/A) | | | | |
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| | 07/07/2021 | |
|--|--|--|
| The date of each amendment(s) ac | option: | , if other than the |
| date this document was signed. | 7/2021 | |
| Effective date <u>if applicable</u> : | | |
| | (no more than 90 days after amendment file | dater |
| Note: If the date inserted in this b document's effective date on the De | ock does not meet the applicable statutory filing require partment of State's records. | ments, 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 sh | areholder action and shareholder |
| The amendment(s) was/were ado by the shareholders was/were su | pted by the shareholders. The number of votes cast for the ficient for approval. | e amendment(s) |
| ☐ The amendment(s) was/were app must be separately provided for | roved by the shareholders through voting groups. The folicach voting group entitled to vote separately on the amend | lowing statement lment(s): |
| "The number of votes cast | or the amendment(s) was/were sufficient for approval | |
| by | | |
| | (voting group) | |
| 07/07/2021 Dated | | |
| Signature | 1 edus | |
| selected | report, president or other officer – if directors or officers he by an incorporator – if in the hands of a receiver, trustee ed fiduciary by that fiduciary) | |
| | PEDRO GOMEZ | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |