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A. BUTLER

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:		EALTY INC.			
DOCUMENT NUMBER:	APPLICATION	N #1586964 EIN	#92-0768379 FILE #83285		
The enclosed Articles of Amena	<i>lment</i> and fee are su	bmitted for filing.			
Please return all correspondence	concerning this ma	tter to the following:			
	DEVU	JYO FRANTZ MA	ARCELIN JR		
	ORBI	Name of Contact P T REALTY INC.	erson		
	7601 N	Firm/ Compan FEDERAL HWY			
	Address BOCA RATON FL 33487				
		City/ State and Zip	Code		
	•	gurus@gmail.con			
E-m	ail address: (to be us	sed for future annual re	eport notification)		
For further information concern	ing this matter, pleas	se call:			
DEVUYO FRANTZ	MARCELIN JR	at (954.600.0844		
Name of Contact	Person		a Code & Daytime Telephone Number		
inclosed is a check for the follo	wing amount made	payable to the Florida	Department of State:		
-	3.75 Filing Fee & rtificate of Status	S43.75 Filing Fee Certified Copy (Additional copy is enclosed)	Certificate of Status		
Mailing Addi Amendment S Division of Co P.O. Box 632 Tallahassee, F	ection orporations 7	Ai Di TY 24	reet Address nendment Section (vision of Corporations ne Centre of Tallahassee (15 N. Monroe Street, Suite 810 ullahassee, FL 32303		

Articles of Amendment Articles of Incorporation

ORBIT REALTY INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

APPLICATION #15869	964 EIN #92-0768379 FII	LE #83285		
(Docum	nent Number of Corporation (if k	tnown)	* ; ; *	
Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Co	rporation adopts the foll	owing umendmer	
A. If amending name, enter the new name of the co	orporation:			
N/A			The new	
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc.," "chartered," "professional association," or the abbre	" or "Co". A professional co	corporated" or the abbre rporation name must c	viation "Corp.,"	
B. Enter new principal office address, if applicable			1.2	
(Principal office address <u>MUST BE A STREET ADD</u>	ORESS)	N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>X</u>)			
	N	N/A		
				
D. If amending the registered agent and/or register		nter the name of the		
new registered agent and/or the new registered	office address:			
Name of New Registered Agent				
	N/A			
	(Florida street address)			
New Registered Office Address:	N/A	Florida		
ren regimered copper rations.	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Reg	ictored Agent:			
I hereby accept the appointment as registered agent.		e obligations of the posit	tion.	
	N/A			
		<i>r. t.</i> ·		
Signo	iture of New Registered Agent, ij	t 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)

Example:

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	$\overline{\mathbf{b} L}$	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	CEO	JASON LITT	2335 SW 22 AVE #102
Add	<u></u>		DELRAY BEACH FL 33445
		N/A	
Add			
Remove Change		N/A	
Add			
Remove 4) Change		N/A	
Add			
Remove 5) Change		N/A	
Add			
Remove 6)Change		N/A 	
Add			
Remove			

	sheets, if necessary)). (Be specific)	N/A		
		_			
-					
				·	
				-	
			-		
provisions for im	provides for an explementing the an	cnange, reciassii nendment if not (ication, or cancellate contained in the am	<u>ion of issued snares</u> endment itself:	ra E
	ible, indicate N/A)				
(if not applied		N/A			
(if not applied					
(if not applice					
(if not applied					
(if not applice					
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The date of a	each amendment(s) adoptic	.n. N/A	if other than the
	iment was signed.		It office than the
	te if applicable:	N/A	
	<u> </u>	(no more than 90 days after amendment file	: date)
	date inserted in this block of ffective date on the Departm	loes not meet the applicable statutory filing requirent of State's records.	rements, this date will not be listed as the
Adoption of	Amendment(s)	(CHECK ONE)	
	dment(s) was/were adopted b s not required.	by the incorporators, or board of directors without s	hareholder action and shareholder
	dment(s) was/were adopted breholders was/were sufficie	by the shareholders. The number of votes east for t it for approval.	he amendment(s)
		by the shareholders through voting groups. The factoring group entitled to vote separately on the ame	
"The	e number of votes cast for th	e amendment(s) was/were sufficient for approval	
by _		N/A	
		(voting group)	
		BER 8, 2022	
	DatedDocuSigned by:		
	Signature Deveyo M.	valin	
	selected, by a	eppresident or other officer – if directors or officers n incorporator – if in the hands of a receiver, truste uciary by that fiduciary)	
		DEVUYO FRANTZ MARCELIN JR	
		(Typed or printed name of person signing)	
		PRESIDENT OF ORBIT REALTY IN	IC.
		(Title of person signing)	