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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	FORTEX REALTY GROUP INC
DOCUMENT NUMBER: P230	
The enclosed Articles of Amenda	ment and fee are submitted for filing.
Please return all correspondence	concerning this matter to the following:
LINA MO	NROY
	Name of Contact Person
	Firm/ Company
11248 NW	51 TERRACE .
MIAMI, F	Address L 33178
 -	City/ State and Zip Code
giovanniho	@gmail.com
E-mai	address: (to be used for future annual report notification)
For further information concerning	g this matter, please call:
LINA MONROY	at (305) 600-7893
Name of Contact P	erson Area Code & Daytime Telephone Number
Enclosed is a check for the following	ng amount made payable to the Florida Department of State:
\$35 Filing Fee	75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee ficate of Status Certified Copy (Additional copy is enclosed) CS52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Malling Address Amendment Sect Division of Corp P.O. Box 6327 Tallahassee, FL	orations Amendment Section Orations Division of Corporations The Centre of Tallahassan

Articles of Amendment to Articles of Incorporation of

SECRETARY TALLAHASSE	2023 AFR 28	Supplied to the state of the st
·	70	. [

FORTEX REALTY GROUP INC		-
		;
(Name of Corporation as currently filed with the Florida Dept. of State	a)	
P23000019322	ب ز:	•
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the fits Articles of Incorporation:	following ame	ndment(s
L. If amending name, enter the new name of the corporation:		
	77	
iame must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abb 'Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must 'chartered," "professional association," or the abbreviation "P.A."	The breviation "Co" contain the	new rp. " word
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	 	
	,	
. Enter new mailing address, if applicable:		-
(Mailing address MAY BE A POST OFFICE BOX)		
		_
. If amending the registered agent and/or registered office address in Florida, enter the name of the		_
. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:		_
new registered agent and/or the new registered office address:		_
new registered agent and/or the new registered office address:		_
new registered agent and/or the new registered office address:		_
Name of New Registered Agent (Florido street address)		_
Name of New Registered Agent	(7in Code)	_
Name of New Registered Agent (Florida street address) New Registered Office Address: Florida	(Zip Code)	_
Name of New Registered Agent (Florida street address) New Registered Office Address: (City)	(Zip Code)	_
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) We Registered Agent's Signature, if changing Registered Agent.	•	_
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) We Registered Agent's Signature, if changing Registered Agent.	•	_
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) We Registered Agent's Signature, if changing Registered Agent.	•	_
Name of New Registered Agent (Florido street address) New Registered Office Address: (City) (City) Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the pas	•	_
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) Registered Agent's Signature, if changing Registered Agent.	•	_
Name of New Registered Agent (Florida street address) New Registered Office Address: (City) ew Registered Agent's Signature, if changing Registered Agent; hereby accept the obligations of the pos	•	_

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; CF() = 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add. Example:

X Change	EI	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1)Change	VP	GIOVANNI HERNANDEZ	3075 NW 107 AVE.
Add			2ND FLOOR
X Remove			MIAMI, FL 33178
2) Change			
Add			
Remove 3 1 Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			+
Remove			
6) Change			
Add			
Remove			

an amendment provides for an exchange, provisions for implementing the amendmen (if not applicable, indicate N/A)	reclassification, or cancellation of issued shares, at if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	, if other than the
Effective date if applicable:	
	ino more than 90 days after amendment file date)
Note: If the date inserted in this block does not document's effective date on the Department of S	meet the applicable statutory filing requirements, this date will not be listed as the state's records.
Adoption of Amendment(s) (CHE	CCK ONE)
The amendment(s) was/were adopted by the in action was not required.	acorporators, or buard of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for ap	nareholders. The number of votes cast for the amendment(s) proval.
must be separately provided for each voling gi	shareholders through voting groups. The following statement roup entitled to vote separately on the amendment(s):
"The number of votes cast for the amend	ment(s) was/were sufficient for approval
by	· · · · · · · · · · · · · · · · · · ·
tvoting	g group)
Dated	R.
(By a director, preside selected, by an incorp appointed fiduciary by	on or other officer - if directors or officers have not been orator - if in the hands of a receiver, trustee, or other court y that fiduciary)
LINA M. MOI	NROY
(Ту	ped or printed name of person signing)
PRESIDENT	
(Tit	de of person signing)