## P23000036052

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	PRATION: MAGGY THE RE	CALTOR, INC.		
DOCUMENT NUM	D22000026052			
The enclosed Article	s of Amendment and fee are su	bmitted for filing.		
Please return all corr	espondence concerning this ma	tter to the following:		
	MAGGY B. DE TULLIO			
		Name of Contact Person	n	
	MAGGY DE TULLIO REAL ESTATE, INC.			
		Firm/ Company		
	9000 SHERIDAN ST # 117			
	*.=	Address		
	PEMBROKE PINES, FL 330	024		
		City/ State and Zip Cod	e	
	INFO@MAGGYREALTY.C	СОМ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati  MAGGY B. DE TU	on concerning this matter, please	se call:	202-3959	
Name of Contact Person		at ( Area Co	de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made	payable to the Florida Dep.	artment of State:	
☐ \$35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
Amendment Section Division of Corporations		Amendment Section Division of Corporations		
P.O. Box 6327		The C	entre of Tallahassee	
Ta	llahassee, FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

SERVERS OF STATE

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## Articles of Amendment to Articles of Incorporation of

MAGGY THE REALTOR, INC.

MAGGITHE REALTOR, INC.	
(Name of Corporation as currently filed with the Florida Dept. of Stat	<u>e</u> )
P23000036052	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this <i>Florida Profit Corporation</i> adopts the its Articles of Incorporation:	following amendment(s) to
A. If amending name, enter the new name of the corporation:	
MAGGY DE TULLIO REAL ESTATE, INC.	T
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the al "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name mustichartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. 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:	<u> </u>
Name of New Registered Agent	
Name of the megistered rigem	
(Florida street address)	
N 1	
New Registered Office Address:, Florida	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the particular of the particular with an accept the obligations of the particular with a particu	position.
	2024 SEL
Signature of New Registered Agent, if changing	0CT 31
Check if applicable  ■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	PH 1:

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.

Example: X Change	<u>PT</u>	John De	<u>oe</u>			
X Remove	$\underline{\mathbf{V}}$	Mike Jo	<u>ones</u>			
X Add	<u>sv</u>	Sally S	<u>mith</u>			
Type of Action (Check One)	<u>Title</u>		<u>Name</u>		<u>Addres</u> s	
1) Change		_		_		
Add						
Remove						
2) Change		_		-		
Add						
Remove Change		_		_		
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4) Change		_		_		
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Remove					- 100 C T T T T T T T T T T T T T T T T T T	- 0
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E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
N/A		
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F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)  N/A		
	<del></del>	
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		_
	Sign Co	<del>- 23</del>

FILED

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SECRETARY OF STATE

The date of each amendment	s) adoption:	, if other than the
date this document was signed.	1/1/2026	
Effective date if applicable:	1/1/2025	
	(no more than 90 days after amendment file date	)
	his block does not meet the applicable statutory filing requirement e Department of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareh	older action and shareholder
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the an re sufficient for approval.	nendment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
bv		
· -	(voting group)	
sel	ra director, president or other officer – if directors or officers have ected, by an incorporator – if in the hands of a receiver, trustee, or pointed fiduciary by that fiduciary)	
	MAGGY B. DE TULLIO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

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