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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division of Corporations KEALTOR#1 Tracic Document) DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. P240000 22906 Please return all correspondence concerning this matter to the following: REALTUR #1PA
Firm/ Company nerry Tree Rol.
Address Tariar Odriquez @ Watsonrealty Corp. Com For further information concerning this matter, please call: Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee ☐\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

	of
REAL	OR#1PA
(Name of	Corporation as currently filed with the Florida Dept. of State)
	• .
0.00	(Dowlman) Number at Corporation (it known)

	Amendment 2021
te Articles of In	ncorporation
0 - 0 - 0 - 0 - 0 - 0	
KEALTOK-IT I PH	tly filed with the Florida Dept. of State)
(Name of Corporation as Current	try filed with the filorida Bept. of Grace)
PAYWOOD22906 (Doeliment Number of	of Corporation (if known)
· ·	s Florida Profit Corporation adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:	
MARIA RODRIGUEZ DA.	The new
ume 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 contain the word
Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	1210 Cherry Tree Rd. St. Augustine, FL 32086
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1210 Cherry Tree Rd. St. Augustine, FC 32.086
If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida s	treet address)
New Registered Office Address:	(City) , Florida (Zip Code)
ew Registered Agent's Signature, if changing Registered Agen	nt.
nereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.
Mursu o	Pilmez
Signature of New	Registored 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.

Example:

X Change	<u>PT</u>	John Do	<u>e</u>						
X Remove	<u>V</u>	Mike Jor	nes						
X Add	<u>sv</u>	Sally Sm	<u>nith</u>						
Type of Action (Check One)	<u>Title</u>		<u>Name</u>				<u>Addres</u> s		
1) Change		_							
Add									
Remove									
2) Change		_		·-					
Add								1	
Remove 3) Change		_	<u> </u>	· · · · ·					
Add								<u> </u>	
Remove									
4) Change		_				<u>_</u>	<u>.</u>	·	
Add									
Remove									_ _
5) Change		_		•					
Add									
Remove									
6) Change		_		·					
Add									
Pamova									

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
I'm a Keyltor	_
	_
	_
	_
	_
	_
	_
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)	
	_
	_
	_
	_

.

The date of each amendment(s) ad	option:		, if other than the
date this document was signed.			
Effective date <u>if applicable</u> :			
	(no more than 90	days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep		able statutory filing requirements, this date will n	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were adopaction was not required.	oted by the incorporators, or bo	oard of directors without shareholder action and sh	ıareholder
☐ The amendment(s) was/were adop by the shareholders was/were suf		number of votes cast for the amendment(s)	
		ugh voting groups. The following statement ote separately on the amendment(s):	
"The number of votes cast for	or the amendment(s) was/were	e sufficient for approval	
by		."	
	(voting group)	<u> </u>	
Dated	0/2024		
Signature	Muria Rou	ngun	
•	•	er -fi directors or officers have not been	
	by an incorporator – if in the diductary)	hands of a receiver, trustee, or other court	
арропис	Murru	Rodngur	
_	(Typed or printed na	ame of person signing)	
_	Owner CRE	og/for)	
	(Title of person sign	ning)'	

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