P92000006734

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phon	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Gainesville Real E	state Management Co., Inc			
DOCUMENT NUMI	D0200000C724				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Cheryl Cooke				
		Name of Contact Person	1		
	Gainesville Real Estate Management Co., Inc.				
		Firm/ Company			
	2040 NW 67th Place				
		Address	·		
	Gainesville, FL 32653				
		City/ State and Zip Cod	e		
ccool	te@gremco.com				
<u> </u>		sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call: at (376-4939		
Name of Contact Person		at (Area Co) de & Daytime Telephone Number		
	r the following amount made		,		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301		

Articles of Amendment to **Articles of Incorporation** of

Gainesville Real Estate Management Co., Inc.		
(Name of Corporation as current	tly filed with the Florida Dept. o	f State)
P92000006734		
(Document Number of	of Corporation (if known)	·
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adop	ots the following amendment(s)
A. If amending name, enter the new name of the corporation:		
NA		The new
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation	ted" or the abbreviation
D 72	NA	
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)	NA	
(174 min) 4 min (174 min)		

D. If amending the registered agent and/or registered office add	dusce in Flouida, antar the name.	o f the
new registered agent and/or the new registered office address		or the
NA NA	_	
Name of New Registered Agent		
		
(Florida s	ireet address)	
New Registered Office Address:		lorida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agen	***	
I hereby accept the appointment as registered agent. I am familiar	r with and accept the obligations o	f the position.
		5
		AAR F
Signature of New	Registered Agent, if changing	7 13 ARN SSI
		illo ≠ iu

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 <math>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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	<u>v</u>	Joyce P. Martin	2040 NW 67th Place
Add			Gainesville, FL 32653
X Remove			
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5)Change			
Add			
Remove			
6) Change			
Add			
Remove			

 If amending or adding additional Arti (Attach additional sheets, if necessary). 	(Be specific)
NA .	
	· · · · · · · · · · · · · · · · · · ·
	·
	
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If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(ij noi applicable, indicale NA)	
΄ Α	
A	
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IA	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Cheryl Cooke	
(Typed or printed name of person signing)	
President	
(Title of person signing)	