P9400006/145

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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Ameria

SEP 2 5 2012 T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corpora						
NAME OF CORPORA DOCUMENT NUMBE	Dallana	1 Realty 1 06/145	Network, Buc			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspond	ondence concerning this ma	tter to the following:				
	Edward	P GDays	<u>.</u>			
*****	Glubal	100	NetworkIng			
	6063	STRADA L	SLE WAY			
	Octon & Address 32835					
City/ State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call: NA AS NATURE at (407), 292-5624						
Name of	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:			
\$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)			
Mailing Address		Street	Address			

Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

E SEP 24	PH 3: 23
** ~ -~ -	0. 23

	Articles of Incorporation	₩ SEP 24	Dы г.
Elobal Real	lty Network, In	C. TALLATINEY	+n 3: 23 ₩ 8#+5
(Name of Corporation as curre	ntly flied with the Florida Dept. of State)		EULONIDA
P9400006114	45		-
(Document Num	ber of Corporation (if known)		_
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, this <i>Florida Profit Corpor</i>	ation adopts the followin	g amendment(s) t
A. If amending name, enter the new name of	the corporation:		m.
name must be distinguishable and contain th	e word "corporation" "company" or "	'incorporated" or the a	_The new hhreviation
"Corp.," "Inc.," or Co.," or the designation	"Corp," "Inc," or "Co". A professional		
word "chartered," "professional association,"	or the abbreviation P.A.		
B. Enter new principal office address, if appl			-
(Principal office address MUST BE A STREET	<u>r Address</u>)		
			_
			<u>-</u>
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFIC</u>	JE BOX)		-
			_
			-
D. If amending the registered agent and/or renew registered agent and/or the new registered.		the name of the	
new tegistered agent and of the new regis	N//		
Name of New Registered Agent			
	<u> </u>		
	(Florida street address)		
New Registered Office Address:	NA.	Florida	_
	(City)	(Zip Code)	
Now Book and America Street and Italy and	Bootstood America		
New Registered Agent's Signature, if changing I hereby accept the appointment as registered as	<u>represented Agent:</u> gent. I am familiar with and accept the ob-	ligations of the position.	
, , , , , , , , , , , , , , , , , , ,		- ·	
Signature	e of New Registered Agent, if changing		

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.

<u>X</u> Change	<u>PT</u>	John Doe	w 1 /		
X Remove	<u>v</u>	Mike Jones	NIA		
X Add	<u>sv</u>	Sally Smith	1 14		
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) Change		. ——			
Add					-
Remove					
2) Change				 	
Add					
Remove			\ \ /		
3)Change		<u> </u>			
Add				***************************************	
Remove					
4) Change					
Add					
Remove					<u> </u>
5) Change					
Add					• •
Remove					
6) Change					
Add					·
Remove					

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
AMENDING ARTICLE VI	
PUPOSE+DUPATION	
1- CHANGE PEOL ESTATE BROKERAGE FIR	
SALE ON PURCHASE & PEAL EST	17.
+0	
ANY and ALL LAWFUL BUSINE	<u>s</u>
2. 17/4	
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)	
NA	

	The date of each amendment(s)	adoption:	91	ವಿಶ	15		
	Effective date if applicable:		9	27	112		
		(no mo	ere than 9	0 days after an	nendment file date	9	
	Adoption of Amendment(s)	(CHECK O	<u>NE</u>)				
\	The amendment(s) was/were a by the shareholders was/were			e number of vo	tes cast for the am	endment(s)	
	☐ The amendment(s) was/were a must be separately provided j						
	"The number of votes cast for the amendment(s) was/were sufficient for approval by the number of votes cast for the amendment(s) was/were sufficient for approval "" (foling group)						
		(foting grou	P)				
	The amendment(s) was/were a action was not required.	adopted by the board of	directors	without sharel	nolder action and s	shareholder	
	☐ The amendment(s) was/were a action was not required.	adopted by the incorpor	ators with	nout shareholde	er action and share	holder	
	Dated	9/20/)2_				
	Signature Tonys						
	selec	a director, president or octed, by an incorporator binted fiduciary by that	– if in th	e hands of a re-			
		Edwar		name of person	JONYE		
		PG	1 printed 1	manie of person	i signing)		
		(Title	of persor	signing)			