## P94000082762

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## **COVER LETTER**

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Advanced Realty Services, Inc. P94000082762 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Pamela J Hargrove-Van Ornam Name of Contact Person Advanced Realty Services, Inc. Firm/ Company 2473 SE Drayton Road Address Port St Lucie, FL 34952 City/ State and Zip Code pjhargrove.vanornam@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (772 519-1298

Area Code & Daytime Telephone Number Pamela J Hargrove-Van Ornam Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & ■\$52.50 Filing Fee □ \$35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed)

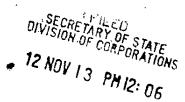
**Mailing Address** 

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

Street Address

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

## Articles of Amendment to Articles of Incorporation of



(Name of Corporation as currently filed with the Florida Dept. of State)	
P94000082762	
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amen its Articles of Incorporation:	ndment(s) t
A. If amending name, enter the new name of the corporation:	
The	new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Co". A professional corporation name must contain word "chartered," "professional association," or the abbreviation "P.A."	ation n the
B. Enter new principal office address, if applicable: 2473 SE Drayton Road	
(Principal office address MUST BE A STREET ADDRESS)  Port St Lucie, FL 34952	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(maining dual vis mark page 1 obs of 120 poin)	
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:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address:, Florida	
(City) (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 position.	
Signature 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 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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	<u>ke Jones</u>	
X Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<u>P</u>	Michael Armbruster	725 SW PORT ST LUCIE BLVD., #206
Add			PORT ST LUCIE FL 34984
X Remove			
2) Change	<u>P</u>	Denise E Kelly	3057 SW SAVONA BLVD.
X Add			Port St Lucie, FL 34953
Remove			
3) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change	<del></del>		
Add			
Remove			
6) Change			
Add			
Remove			

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(if not applic	able, indicate N/A)	nament II not v	ontained in the	amenument use	:11.
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The date of each amendment(s) ac	doption:10-30-12
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) ifficient for approval.
	proved by the shareholders through voting groups. The following statement 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)
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder
Dated_10/30/	2012
selecte	Devide E Jylly  lirector, president or other officer – if directors of officers have not been  ed, by an incorporator – if in the hands of a receiver, trustee, or other court  eted fiduciary by that fiduciary)
	Denise E Kelly
	(Typed or printed name of person signing)
	President
	(Title of person signing)