P96 000089978

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COVER LETTER

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: CLASSIC REALTY OF NW FL INC. DOCUMENT NUMBER: P96000089978 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: CANDACE CULVER Name of Contact Person ELEANOR W. GASI. CPA, P.A. Firm/ Company 4400 BAYOU BLVD STE 23-C Address PENSACOLA, FL 32503 City/ State and Zip Code CCULVER@GASI-CPA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: CINDY EDGAR Name of Contact Person Area Code & Daytime Telephone Number 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 Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy 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 to Articles of Incorporation of

FILED

2022 MAR 14 AM 9: 34

CLASSIC REALTY OF NW FL INC.	
(Name of Corporation as current	ly filed with the Florida Depti-of State) AY GF STATE
D0400000000	TALLAHASSEE, FL
P96000089978 (Document Number of	of Corporation (if known)
· ·	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
N/A	The new
name 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
B. Enter new principal office address, if applicable:	N/A
(Principal office address MUST BE A STREET ADDRESS)	
	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
(muning andress MAT BE A 1031 01 17CL BOX)	
D. If amending the registered agent and/or registered office add	
new registered agent and/or the new registered office address	<u>is:</u>
Name of New Registered Agent N/A	
(Florida s	treet address)
u b i logi ili NIA	Florida
New Registered Office Address: N/A	(City) (Zip Code)
	•
New Registered Agent's Signature, if changing Registered Agen	nt:
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

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 Doe	
X Remove	<u>v</u>	Mike Iones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u> .	<u>Addres</u> s
I) X Change	PST	F. B. EDGAR	10901 LILLIAN HWY
Add			PENSACOLA, FL 32506
Remove			
2) Change	<u>v</u>	APRIL BLACKWELL	4747 HURON DR
X Add			PENSACOLA, FL 32507
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	
stacts againstal staces, if necessary). (be specific)	
	-
<u> </u>	
	
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)	
(y noi applicable, indicale 1974)	
4	
	
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	t(s) adoption: N/A, if other than the
date this document was signed	i.
Effective date if applicable:	3/8/2022
	(no more than 90 days after amendment file date)
	this block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder action and shareholder
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of vote	s cast for the amendment(s) was/were sufficient for approval
by	
• ====	(voting group)
Dated Signature	3-10-22 Amy Cal
	By a director, president or other officer - if directors or officers have not been
S	elected, by an incorporator - if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)
S	elected, by an incorporator - if in the hands of a receiver, trustee, or other court