## P97000023915

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Name)
(Document Number)
Certified Copies Certificates of Status
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SECRETARY OF STATE
TALLAHASSEE, FL

FILED
2024 OCT 15 PM 4: 49



## **COVER LETTER**

Division of Corporations							
NAME OF CORPORATION: Delaplaine Realty 2NC.  DOCUMENT NUMBER: 65-0732-806							
The enclosed Articles of Amendment and fee are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Delaplaine Realty Inc  Firm/ Company  90 Par DR Willa H  Address  City/ State and Zip Code  E-mail address: (to be used for future annual report notification)  Address  E-mail address: (to be used for future annual report notification)							
For further information concerning this matter, please call:							
Louise Sophie DelaPla 1 305 7985642  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:							
S35 Filing Fee  Certificate of Status  Certificate of Status  Certificate of Status  (Additional copy is enclosed)  S43.75 Filing Fee & Certificate of Status  Certified Copy  (Additional Copy  (Additional Copy							

Mailing Address

**TO:** Amendment Section

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

is enclosed)

2024 OCT 15 PM 4:

## Articles of Amendment to Articles of Incorporation of

7					
(Name of Corporation as currently fi	led with the Florida Dept. of State)				
Delaplaine Realtylne - 65-0732-806 (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 amendment(s) to its Articles of Incorporation:					
A. If amending name, enter the new name of the corporation:					
	***				
name must be distinguishable and contain the word "corporation," "com "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A pr "chartered," "professional association," or the abbreviation "P.A."					
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )					
-					
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)					
- -	SECRE FALL				
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 Souise	Sophie Delapita Del				
New Registered Office Address: 90 Park Dr.	- #4 Bal Hal Book				
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.				
Seleplani Signature of New Regis	Determined to the state of the				
Signature of New Neglistered Agent, If crianging					

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: <u>X</u> 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)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s	
1) X Change	P	Renée	Delaplai	NE 10 hagor Migmi Bea	ce Circle
Add	to	$\triangleright$	·	Miami Bea	ch FL
Remove				33141	
2) Change	P	Louise	Sophic	90 Parti	Dr #4
<u></u> ∆dd		Delai	Sophie plaine	Bul Hack	York (
Remove Change				<u> FL 33</u>	
Add					S 5
Remove					PA t:
4) Change				<del></del>	STAT 50
Add				1	
Remove				<del></del>	
5) Change					
Add					
Remove					
6) Change				<del></del>	
Add					<u> </u>
Remove					

	each amendment(s) adoption:	, if other than the
date this doc	cument was signed.	,
Effective da	ate if applicable: Otolog D, 2024 (no more than 90 days after amendment file date)	
	e date inserted in this block does not meet the applicable statutory filing requirement effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of	f Amendment(s) ( <u>CHECK ONE</u> )	
	ndment(s) was/were adopted by the incorporators, or board of directors without sharehoas not required.	older action and shareholder
	ndment(s) was/were adopted by the shareholders. The number of votes cast for the ame hareholders was/were sufficient for approval.	endment(s)
	ndment(s) was/were approved by the shareholders through voting groups. The followin separately provided for each voting group entitled to vote separately on the amendmen	
"Th	he number of votes cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	Dated	
	Signature AAA	SEC
	(By a director, president or other officer – if directors or officers have r selected, by an incorporator – if in the hands of a receiver, trustee, or o	_ m
	appointed fiduciary by that fiduciary)	not been other court LLAHASSE
	KENEE DELAPLAINE	
	(Typed or printed name of person signing)	4: 50 STAT E, FL
	<i> </i>	· # C

(Title of person signing)