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(Req	uestor's Name)	
(Add	ress)	
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(City,	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busi	ness Entity Na	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer	
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STORE LARY OF STATE

C. GOLDEN

JUL 1 5 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION	ON: DORD Y	STANLEY REA	ALTY INC
DOCUMENT NUMBER:	P9700	0057285	
The enclosed Articles of Am	nendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this matter to the following:			
GAYLENE STANLEY Name of Contact Person			
LORD & STANLEY REALTY INC			
7151 SHADY GROVE WAY			
TALLAHASSEE, FL 32312 City/ State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
GAYLENE STANLEY at (850) 321-7787 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 & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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

Articles	of	Incorporation

FILED

LORD + STAIN		. "
17000 0 1 (3) (A) (N) (SV REALTY T	NC 2019 JUL 15 PM 1: 19
(Name of Corporation	as currently filed with the Florid	a Dept. of State) Retains
Pannonta	125	ALL AHASSEE, FLORID
(Docume:	nt Number of Corporation (if known)
	. ,	,
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	Statutes, this Florida Profit Corpora	tion adopts the following amendment(s) t
A. If amending name, enter the new name of the corp	ooration:	
		The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp." word "chartered," "professional association," or the ab	"Inc," or "Co". A professional c	ncorporated" or the abbreviation orporation name must contain the
B. Enter new principal office address, if applicable:		
Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered new registered agent and/or the new registered off Name of New Registered Agent	l office address in Florida, enter th	ne name of the
	(Florida street address)	
	(i tortua sireet uaaress)	
New Registered Office Address:		Florida
Ach Regional Office Address.	(City)	(Zip Code)

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:	ove, ana saa	iy Smun, Sv as an Ada.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>y</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
l) Change	_5_	JASON PICHT	405 SANTY COURT
_X Add			TALLAHAGGE FL 323/2
Remove			
2) Change			
Add			
Remove			
3) Change		- <u> </u>	
Add			
Remove			
4) Change	-		
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
	
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	· · · · · · · · · · · · · · · · · · ·
provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
,	
	1
	NA
	NA

The date of each amendment(s) adoption: date this document was signed.	6-24-2019	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file da	ue)
Note: If the date inserted in this block doe document's effective date on the Department	s not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	CHECK ONE)	
The amendment(s) was/were adopted by the shareholders was/were sufficient for	he shareholders. The number of votes cast for the a proval.	mendment(s)
☐ The amendment(s) was/were approved by must be separately provided for each vota	the shareholders through voting groups. The following group entitled to vote separately on the amendm	ring statement nent(s):
	nendment(s) was/were sufficient for approval	
by		
(voting group)	
	ne board of directors without shareholder action and	shareholder
The amendment(s) was/were adopted by the action was not required.	ne incorporators without shareholder action and shar	reholder
Dated6/2	ene Stanley esident or other officer - if directors or officers have	
Signature <u>Jay</u>	ene Stanley	
(By a director,)pr	esident or other officer - if directors or officers have	e not been
sciected, by an it	corporator – if in the hands of a receiver, trustee, or try by that fiduciary)	other court
(-	PAVISHE STANLICY	
	(Typed or printed name of person sigming)	
	PRESIDENT	
	(Title of person signing)	

. . . .