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(Requestor's Name)			
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PICK-UP	☐ WAIT	MAIL	
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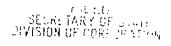
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: <u>REPARTY S</u> E	prices P	NUPENTY	MANAGEMENT CO.
	a: <u>P98000</u>		·····	
The enclosed Articles of A	Amendment and fee are su	ubmitted for fi	ling.	
Please return all correspon	ndence concerning this ma	itter to the foll	owing:	
		<i>M</i> #4	1/-24	
M Mc VE 7Y Name of Contact Person		n		
	RETAUTY SETA	vices P	noe Ent	Y MANAGEMENT CO.
			Company	
	2525 PA	NEWAY	57	
	1505 PA	A	dress	
	FORT MY	ens, Fo	- 339	01
		City/ State	and Zip Cod	e
	MIRG@ RET	9L7Y5CZ	VICESPI	M. COM
	E-mail address: (to be u	sed for future	annual report	notification)
For further information co	ncerning this matter, plea	se call:		·
MICHAEZ	MCVETY	at	239	
Name of C	Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the	Florida Dep	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	Certified	al copy is	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendi Division P.O. Bo	Address ment Section of Corporations ox 6327 ssee, FL 32314		Amend Division Cliftor	Address Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**



2016 OCT 31 PM 1:31

REALTY SERVICES PROPERTY MANAGEMENT

P9	80000150	661		
(Doc	cument Number of 0	Corporation (if known)		
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	rida Statutes, this <i>F</i>	lorida Profit Corporati	on adopts the following amendn	ient(s
A. If amending name, enter the new name of the	corporation:			
			The ne	w
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or t	orp," "Inc," or "C	o". A professional con	corporated" or the abbreviation poration name must contain the	n ie
3. Enter new principal office address, if applical	ble:			
Principal office address <u>MUST BE A STREET A</u>				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE I	BOX)			
 If amending the registered agent and/or registered agent and/or the new registered. 		ss in Florida, enter the	name of the	
	ca office address:			
Name of New Registered Agent	<u>.</u>	.	10.444	
			_	
	(Florida stree	1 address)		
New Registered Office Address:			, Florida	
	(0	ity)	(Zip Code)	
New Registered Agent's Signature, if changing R	Pagistared Agent:			
hereby accept the appointment as registered agent	t. I am familiar wi	th and accept the oblige	ations of the position.	
		Ţ.		

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.

X Change	PT John Do	<u>e</u>	
X Remove	V Mike Jo	nes	
<u>X</u> Add	SV Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	M McVETY	2525 PARKWAY ST
Add			FORT MYEDES, FL 33901
Remove			
2) Change		M MoVety	2525 PARTEWAY ST
Add			FORT MYERS, FL 33901
<u></u> Remove			
3) Change	7	JON MOVETY	2525 PARKWAY 87
X Add			FORT MYERS, FC 3390)
Remove			
4) Change	VP	JON MCVETY	2525 PAREWAY ST
X Add			FORT MYERS, PC 33901
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

an amendment provides for an exchange, rec rovisions for implementing the amendment if (if not applicable, indicate N/A)				
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(if not applicable, indicate N/A)	not contained in t	the amendi	ment itself:	
		· -		
	<u> </u>			
		<u></u>		

The date of each amendment(s) adoption:	rate, lif other than the
date this document was signed.	BEGRETARY OF STATE
Effective date if applicable:	
(no more ti	han 90 days after amendment file date) 2016 OCT 31 PH 1: 31
Note: If the date inserted in this block does not meet the a document's effective date on the Department of State's record	applicable statutory filing requirements, this date will not be listed as the ds.
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders, by the shareholders was/were sufficient for approval.	The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholder must be separately provided for each voting group entitle	s through voting groups. The following statement ed to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) wa	s/were sufficient for approval
by	n
by(voting group)	
☐ The amendment(s) was/were adopted by the board of dire action was not required.	ctors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators action was not required.	s without shareholder action and shareholder
Dated/0/26/16	
Dated / 0 / 26 / 16 Signature	
(by a director, president or other	officer - if directors or officers have not been
appointed fiduciary by that fiduciary	in the hands of a receiver, trustee, or other court ciary)
Jon Ma	nted name of person signing)
(Typed or pri	nted name of person signing)
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	Fitle of person signing)