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COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: **12**\$43.75 Filing Fee & □\$52.50 Filing Fee □\$43.75 Filing Fee & ☐ \$35 Filing Fee Certified Copy Certificate of Status Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of in	_ •	
Kem	Gate Realthy Inc	٠,
(Name of Corporation as current	tly filed with the Florida Gept. of Sta	ite)
200	. 1	·
	622474	
(Document Sumber)	of Corporation (if known)	
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts th	e following amendment(s) to
A. If amending name, enter the new name of the corporation:		
NIC	T.	
name must be distinguishable and contain the word "corporation	T	The new
name must be distinguishable and contain the word—corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or	on. Company, or incorporation ne "Co". A professional corporation ne	ime must contain the
word "chartered," "professional association," or the abbreviation	"P.A."	
D. D	NIA	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		277
		12 2 7
	•	THE POPULATION OF THE POPULATI
C. Enter new mailing address, if applicable:	MA	TH.
(Mailing address MAY BE A POST OFFICE BOX)	1011.7	
		جب يبي
		- 60
D. If amending the registered agent and/or registered office add	drace in Florida, antar the name of th	142
new registered agent and/or the new registered office address		<u></u>
	- NA	
Name of New Registered Agent	7911	
(Florida s.	treet address)	
V 6 1000 411	NA	L.
New Registered Office Address:	(City)	(Zip Code)
		. ,
New Registered Agent's Signature, if changing Registered Agen	ıt:	
Thereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the	position.
	UΛ	
	NIA	
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: <u>X</u> Change	<u>PT</u>	John Doe	
X Remove	\underline{V}	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	\vee	Kimberly Green	13251 SW 143 Ferrace
Add			13251 SW 143 Terrace Miami FL 33186
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional	dding additional Article sheets, if necessary).	(Be specific)	ucic.		
		NA			
		$\mathcal{N}_{\mathcal{U}}$,			
			- <u></u>		
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	****		,		
<u> </u>					
If an amendment	provides for an exchan	ige, reclassification.	or cancellation of i	ssued shares,	
provisions for in	nplementing the amend able, indicate N/A)			<u>ıt itself:</u>	
(1) 1001 (4)	,	N	A		
<u> </u>					
					

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
10/19/17	
Effective date if applicable: fno more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements document's effective date on the Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the ame by the shareholders was/were sufficient for approval.	ndment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment.	z statement t(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
by	
The amendment(s) was/were adopted by the board of directors without shareholder action and shaction was not required.	areholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder was not required.	older
Dated	
Signature MACH	
(By a director, president or other officer - if directors or officers have r	not been
selected, by an incorporator - if in the hands of a receiver, trustee, or o appointed (fiduciary by that fiduciary)	ther court
(Typed or printed name of Jerson signing)	mer
(Typed or printed name of person signing)	
President	
(Title of person signing)	