545628

	questor's Name)	
(ive	questor s manne)	
(Ad	dress)	
(Ad	dress)	
`	,	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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10/26/20--01010--006 **35.00

2020 OCT 26 AM II: 35 SECRETARY OF STATE

12/5/20

COVER LETTER

Division of Corp		•			
NAME OF CORPO	PRATION: Affiliates Realty, Inc.	c			
DOCUMENT NUM	IBER: S45628				
The enclosed Article	s of Amendment and fee are sul	omitted for filing.			
Please return all corr	espondence concerning this mat	tter to the following:			
	Donna Dunaway				
		Name of Contact Person			
	Affiliates Realty,Inc				
		Firm/ Company			
	7478 SW 60th AVE Suite B				
	7470011 00111112 021102	Address			
	Ocala FL 34476	Address			
		City/ State and Zip Code	:		
	c21ocala@aol.c				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	ion concerning this matter, pleas	se call:			
Donna Dunaway		at (352	de & Daytime Telephone Number		
Name	e of Contact Person	Area Co	de & Daytîme Telephone Number		
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Fiting Fec & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ailing Address		Address Iment Section		
	Amendment Section Amendment Section Division of Corporations Division of Corporations				
	O. Box 6327		The Centre of Tallahassee		
Ta	allahassee, FL 32314	24151	V. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation

FILED

2020 OCT 26 AM II: 35

Affiliates Rea		
(Name of Corporation	as currently filed with the	Florida Dept. of State) STATE
45628		TALLAHASSEE, FI
	nt Number of Corporation (i	
rsuant to the provisions of section 607.1006, Florida S	tatutes this Florida Profit	Corporation adopts the following amendment
Articles of Incorporation:	tatatos, timo risornia e esper-	,
If amending name, enter the new name of the corp	ooration:	
		The new
nne must be distinguishable and contain the word "corpinc" or Co" or the designation "Corp," "Inc." of the designation "corp," "Inc." of the abbrevious chartered," "professional association," or the abbrevious control of t	or "Co". A professional	incorporated" or the abbreviation "Corp., corporation name must contain the word
Enter new principal office address, if applicable:		
rincipal office address MUST BE A STREET ADDR	ESS)	
	<u></u>	
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	}	
(Mulling dudress MAT BE A TOST OF TICE DOX)	,	
. If amending the registered agent and/or registered	d office address in Florida	ı, enter the name of the
. If amending the registered agent and/or registered new registered agent and/or the new registered of	d office address in Florida Tice address:	ı, enter the name of the
new registered agent and/or the new registered of	Tice address:	
new registered agent and/or the new registered of	d office address in Florida Tice address:	
new registered agent and/or the new registered of	Tice address:	
new registered agent and/or the new registered of	Tice address:	
new registered agent and/or the new registered of	Tice address: (Florida street address)	, Florida
Name of New Registered Agent	Tice address:	
Name of New Registered Agent	Tice address: (Florida street address)	, Florida
Name of New Registered Agent New Registered Office Address:	Tice address: (Florida street address) (City)	, Florida
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature if changing Registered Agent	(Florida street address) (City)	, Florida(Zip Code)
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature if changing Registered Agent	(Florida street address) (City)	, Florida(Zip Code)
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature if changing Registered Agent	(Florida street address) (City)	, Florida(Zip Code)
Name of New Registered Agent New Registered Office Address: New Registered Agent's Signature if changing Registered Agent	(Florida street address) (City)	, Florida(Zip Code)
Name of New Registered Agent New Registered Office Address: New Registered Office Address: New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent.	(Florida street address) (City)	Florida, Florida

☐ 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)

Example:

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	<u>PT</u>	John Doc	
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) Change	VP	Gayle Lowry	3704 NE 17th ST
X Add	,		Ocala FL 34470
Remove			
2) Change			-1
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach addition	adding additional Art al sheets, if necessary).	(Be specific)	ctal note.			
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If an amendme	nt provides for an exc	hange, reclassifi	cation, or cane	ellation of issue	d shares,	
provisions for	implementing the am licable, indicate N/A)	endment if not c	ontained in the	amendment itt	seii:	
(ij not upp	medore, marcure 1971)					
						
				<u>. </u>		
						

	October 20,2020	, if other than the
The date of each amendment(s) a date this document was signed.		, // 0.002 //
Octo Effective date if applicable:	bcr 20,2020	
Enecuse date it applicable.	(no more than 90 days after amendment file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirement partment of State's records.	its, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators, or board of directors without shareh	nolder action and shareholder
The amendment(s) was/were ad- by the shareholders was/were se	opted by the shareholders. The number of votes east for the an ifficient for approval.	nendment(s)
☐ The amendment(s) was/were apmust be separately provided for	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendme	ing statement ent(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
October 21	,2020	
Signature	man Illiance	
(By a c	irector, president or other officer - If directors or officers have d, by an incorporator - if in the hands of a receiver, trustee, or ted fiduciary by that fiduciary)	e not been other court
	Donna Dunaway	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	