

(Re	questor's Name)	
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(Cit	ry/State/Zip/Phone #	/
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PICK-UP	MAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
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Certified Copies	_ Certificates o	or Status
Special Instructions to	Filing Officer:	
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Award

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	ration: was ABe	Her Way Mortage of Financial Services	Zno
DOCUMENT NUM	BER: <u>PO3000</u>	Her Way Mortgage & Financial Services	
	s of Amendment and fee are su		
Please return all corre	espondence concerning this ma	atter to the following:	
	Roch	D. 1/2 c	
	yar yara	Name of Contact Person	
		Firm/ Company	
	653 W 2	3 ¹ d 5+ = 1.5 ² Address	
	<i>D C</i>	Address	
	/ anama li	Address 1 Yv 7 7 2 405 City/ State and Zip Code	
	bonh man to	dollace vahon com	
	E-mail address: (to be u	used for future annual report notification)	
For further information	on concerning this matter, pleas	ase call:	
Barbara	Dallas	at 850 , 960-1612	
	of Contact Person	at (ST) 966 - 1612 Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Department of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) (Additional Copy is enclosed)	
Am	illing Address lendment Section vision of Corporations	Street Address Amendment Section Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

A Better Way Mortgage & Financial Services Inc.

Name of Composition and an arrangement of the control of the contr	Alu Glad arish sha Florida Dans af Consal			
PO3000083685	tly filed with the Florida Dept. of State)			
(Document Number	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the fol	lowing amen	dment	(s) to
A. If amending name, enter the new name of the corporation:				
ABW Services Inc.		√ The	ngui	
name must be distinguishable and contain the word "corporati" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name	the abbrevia	ition	
B. Enter new principal office address, if applicable:	653 W 23rd Street #152			
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Panama City, FL 32405	gr est	18	
	3103-0115-1-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		NO.	-0
C. Enter new mailing address, if applicable:				11
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		F		
		· · · · · · · · · · · · · · · · · · ·	_ 2	
		. ,	_ _	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address				
Name of New Registered Agent				
		-		
(Florida s	treet address)			
New Registered Office Address:	New Registered Office Address: . Florida			
	(Zip Code)			
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	it: with and accept the obligations of the posi-	tion.		
Signature of New	Revistered Ayent, 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: XChange	<u>PT</u>	John Do	<u>De</u>		
X Remove	<u>v</u>	Mike Jones			
X Add	<u>sv</u>	<u>Sally Sn</u>	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name	Address	
1) Change	V	_	Eric S Dallas	653 W 23rd St #152	
X Add				Panama City, FL 32405	
Remove					
2) Change		<u> </u>			
Add					
Remove					
3) Change		•••			
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Change					
Add					
Remove					

	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)						
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an amendn	<u> 1ent provides f</u>	or an excha	inge, reclassifi	cation, or canc	enation of 1880c	u shares,	
provisions fo	nent provides fo or implementin	g the amen	inge, reclassifi dment if not c	cation, or canc ontained in the	amendment its	<u>elf:</u>	
provisions fo	nent provides fo or implementin oplicable, indica	g the amen	inge, reclassifi dment if not c	cation, or canc ontained in the	amendment its	elf:	
orovisions fo (if not ap	or implementin oplicable, indica	g the amen ate N/A)	<u>dment if not c</u>	cation, or cane ontained in the	amendment its	o suares, elf:	
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provisions fo (if not ap	or implementin oplicable, indica	g the amen ate N/A)	<u>dment if not c</u>	cation, or cane	amendment its	o snares, elf:	

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	10-10-18	
	10-70-78 (no more than 90 days after amendment file o	late)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requiren partment of State's records.	nents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the fficient for approval.	amendment(s)
	proved by the shareholders through voting groups. The following group entitled to vote separately on the amend	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action at	nd shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and sh	archolder
Dated/L	9-10-18	
Signature	9-10-18 Parlan Dallas	
(By a d selecte	irector, president or other officer – if directors or officers had, by an incorporator – if in the hands of a receiver, trustee, ted fiduciary by that fiduciary)	
	Barbara Dallas	
	(Typed or printed name of person signing)	
	PST	
	(Title of person signing)	***