

P05000121201

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

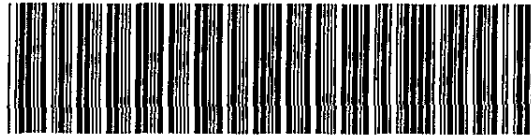
(Business Entity Name)

(Document Number)

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10/28/05--01010--013 **52.50

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05 NOV 18 PM 11: 22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Amgen

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: FORECLOSURE RELIEF SOLUTION, INC.

DOCUMENT NUMBER: P05000121201

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

YOLANDA GUILLEN
(Name of Contact Person)

FORECLOSURE RELIEF SOLUTION, INC.
(Firm/ Company)

5190 NW 167TH STREET, 2ND FLOOR #217
(Address)

MIAMI LAKES, FL 33014
(City/ State and Zip Code)

For further information concerning this matter, please call:

YOLANDA GUILLEN at (786) 663-8484
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|--|---|--|---|

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

October 28, 2005

YOLANDA GUILLEN
5190 NW 167 ST 2 FLOOR #217
MIAMI LAKES, FL 33014

SUBJECT: FORECLOSURE RELIEF SOLUTION, INC.
Ref. Number: P05000121201

We have received your document for FORECLOSURE RELIEF SOLUTION, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6927.

Tracy Smith
Document Specialist

Letter Number: 305A00065316

Articles of Amendment
to
Articles of Incorporation
of

FORECLOSURE RELIEF SOLUTION, INC.

(Name of corporation as currently filed with the Florida Dept. of State)

FILED
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SECRETARY OF STATE
TALLAHASSEE FLORIDA

P05000121201

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

PRINCIPAL ADDRESS - CURRENTLY: 3051 NW 187 ST, CAROL CITY, FL 33056

CHANGE TO: 5190 NW 167TH STREET, 2ND FLOOR #217, MIAMI LAKES, FL 33014

MAILING ADDRESS - CURRENTLY: 3051 NW 187 ST, CAROL CITY, FL 33056

CHANGE TO: 5190 NW 167TH STREET, 2ND FLOOR #217, MIAMI LAKES, FL 33014

REGISTERED AGENT ADDRESS - CURRENTLY: YOLANDA GUILLEN 3051 NW 187 ST, CAROL CITY, FL 33056

CHANGE TO: YOLANDA GUILLEN 5190 NW 167TH STREET, 2ND FLOOR #217, MIAMI LAKES, FL 33014

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption: 10/20/05

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

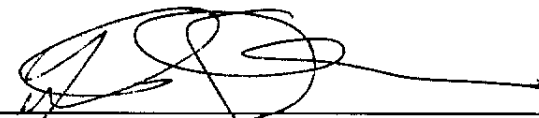
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval by _____."
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature 

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

YOLANDA GUILLEN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

FILING FEE: \$35