

PO6000084569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

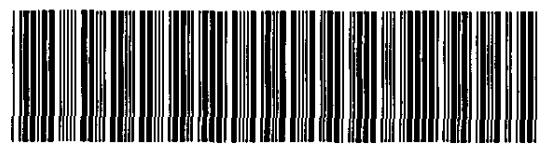
(Business Entity Name)

(Document Number)

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07/21/06--01028--027 \*\*35.00

FILED  
06 JUL 21 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amended  
7-21-06*

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** BUSINESS KEY MORTGAGE INC

**DOCUMENT NUMBER:** P06000084569

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

Please return all correspondence concerning this matter to the following:

HUMBERTO FERNANDEZ

(Name of Contact Person)

BUSINESS KEY MORTGAGE INC

(Firm/ Company)

12930 SW 128 ST STE 202A-2

(Address)

MIAMI, FL 33186

(City/ State and Zip Code)

For further information concerning this matter, please call:

HUMBERTO FERNANDEZ

(Name of Contact Person)

at ( 786 ) 547-6454

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

\$35 Filing Fee

\$43.75 Filing Fee &  
Certificate of Status

\$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

\$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

**Articles of Amendment  
to  
Articles of Incorporation  
of**

BUSINESS KEY MORTGAGE INC.

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

P0600084569

(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**)

**ARTICLE II: The principal business address:**

12930 SW 128 Street Ste 202A-2. Miami, FI 33186

**The Mailing address of the corporation is:**

12930 SW 128 Street Ste 202A-2. Miami, FI 33186

**ARTICLE VII : The Director(s) of the Corporation are:**

Humberto J Fernandez    President    16656 SW 78 terrace

Miami, FI 33193

Christian Saade            Vice-President    13718 SW 118 Terrace

Miami, FI 33186

(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)

06 JUL 21 AM 9:01  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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The date of each amendment(s) adoption: 7-18-06

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

Adoption of Amendment(s) **(CHECK ONE)**

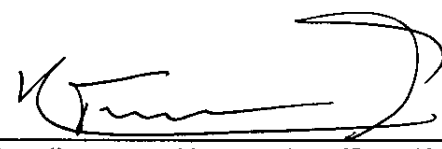
The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

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)

Humberto J. Fernandez  
(Typed or printed name of person signing)

President  
(Title of person signing)

**FILING FEE: \$35**