## PHWW050693

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R. WHITE

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

NAME OF CORPORATION: FINANCORP OVERSEAS CORP					
DOCUMENT NUMI	BER: P140000500	0693			
The enclosed Articles	of Amendment and fee are sub	omitted for filing.			
Please return all corres	spondence concerning this mat	ter to the following:			
	CRYSTAL SAL				
	FINANCORP C	Name of Contact Person			
		Firm/ Company			
	6187 NW 167 S	ST H20			
		Address			
	MIAMI, FL 330				
		City/ State and Zip Code	2		
LE	NSUR@LIVE.C				
<del>.</del>	E-mail address: (to be us	ed for future annual report	notification)		
For further information	n concerning this matter, pleas	e call:			
CRYSTAL	CRYSTAL SALOMON				
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check for 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 & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section  Street Address Amendment Section					
Amendment Section Division of Corporations		Division of Corporations			
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle			•		
Į ai	141145500, 1 D 52517		assee, FL 32301		

FILED

Articles of Amendment to Articles of Incorporation

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## FINANCORP OVERSEAS CORP

(Name of Corporation as currently		t. of State)	
P14000050693			
(Document Number	of Corporation (if known)		•
Pursuant to the provisions of section 607.1006, Flor its Articles of Incorporation:	ida Statutes, this <i>Florida Pro</i>	ofit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the	corporation:		
			_The new
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or to	orp," "Inc," or "Co". A pr	any," or "incorporated" or the al rofessional corporation name must o	bbreviation contain the
B. Enter new principal office address, if applical (Principal office address MUST BE A STREET A.			-
			-
C. Enter new mailing address, if applicable:			-
(Mailing address <u>MAY BE A POST OFFICE I</u>	<u> </u>		-
			•
	-		-
D. If amending the registered agent and/or registered agent and/or the new registered.	stered office address in Flor ed office address:	ida, enter the name of the	
Name of New Registered Agent			
	(Florida street address)		
New Registered Office Address:		, Florida	<del>-</del>
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing F	Registered Agent:		
I hereby accept the appointment as registered agen		ecept the obligations of the position.	

Signature of New Registered Agent, if changing

address of each Office (Attach additional shee Please note the officer/AP = President; V= Vice Executive Officer; CFC held. President, Treasu Changes should be note a change, Mike Jones I Mike Jones, V as Remo	er and/or I ts, if neces director tit e Presiden O = Chief rer, Direct ed in the fo	Director being added: sary)  the by the first letter of the office title: at; T= Treasurer; S= Secretary; D= Director; TR Financial Officer. If an officer/director holds may tor would be PTD. bollowing manner. Currently John Doe is listed as	cer/director being removed and title, name, and  = Trustee; C = Chairman or Clerk; CEO = Chief ore than one title, list the first letter of each office the PST and Mike Jones is listed as the V. There is ese should be noted as John Doe, PT as a Change,
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P/S	CRYSTAL SALOMON	6187 NW 167 ST H40
Add			MIAMI, FL 33015
Remove			
2) Change	P/S	LAURA D BROVEDANI	6187 NW 167 ST H20
Add			MIAMI, FL 33015
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			

Remove

amending or adding additional Artitach additional sheets, if necessary).	(Be specific)			
11 <del>21</del>			<u> </u>	
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	<del>-</del>		12-71	
<u>-</u>				
f an amendment provides for an exc	hange, reclassification	, or cancellation o	f issued shares,	
provisions for implementing the amo	endment if not contain	ed in the amendm	ent itself:	
(if not applicable, indicate N/A)				
		***************************************		

The date of each amendment(s	) adoption: 06/23/14	, if other than the
date this document was signed.		
Effective date if applicable:	06/23/14	
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
Dated_06/23	114 Janna	
sele	a director, president or other officer - if directors or officers have not been octed, by an incorporator - if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	CRYSTAL SALOMON	
	(Typed or printed name of person signing)	
	P/S	
	(Title of person signing)	_