## 527202

(Requestor's Name)
ORIGIN ID: JDMA (305) 358-7711
FRED BERLINER UNITED TRUST FUND 1875 PONCE DE LEON BLVD
UNITED TRUST FUND 1805 PONCE DE LEON BLVD. SUITE 300 CORAL GABLES, FL 33134 UNITED STATES US
UNITED STATES US
(City/State/Zip/Phone #)
(Only otales Ziph Hone #)
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C. GOLDEN OCT 1 6 2018

## Articles of Amendment to Articles of Incorporation of

## FILED

2018 OCT -8 PM 2: 52

UNITED TRUST FUND, INC.			TOTO OCT -0 PM
( <u>Name o</u> 527202	of Corporation as currently	filed with the Florida Dept. of State)	TARY OF S
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Fi	forida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
			The new
name must be distinguishable and con "Corp," "Inc.," or Co.," or the design word "chartered," "professional associa	ution "Corp," "Inc," or "Co	o". A professional corporation name	the abbreviation must contain the
B. Enter new principal office address, (Principal office address MUST BE A S			
C. Enter new mailing address, if applia (Mailing address MAY BE A POST)			
D. If amending the registered agent an	d/or registered office addre	ss in Florida, enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent		<u> </u>	
	1805 PONCE DE LEON BU	VD., SUITE 300	
	(Florida stree	t address)	
New Registered Office Address:	CORAL GABLES	, Florida <sup>33</sup>	134
		Cuy)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar wi		ition.
	Signature of New Reg	gistered Agent, 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.

X Change	<u>PT</u>	John Doe	
X Remove	Y	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	SD	LILLIAN BERLINER	1805 PONCE DE LEON BLVD.
Add			SUITE 300
X Remove			CORAL GABLES, FL 33134
2) Change	D	GEORGE BERLINER	1805 PONCE DE LEON BLVD.
· Add			SUITE 300
X Remove			CORAL GABLES, FL 33134
3) Change	VP	JAMES NOLAN	2 ALHAMBRA PLAZA
Add			SUITE 1240
X Remove			CORAL GABLES, FL 33134
4) X Change	P	FRED BERLINER	1805 PONCE DE LEON BLVD.
Add	<u>-</u>		SUITE 300
Remove			CORAL GABLES, FL 33134
5) X Change	VP	PAUL DOMB	1805 PONCE DE LEON BLVD.
Add			SUITE 300
Remove			CORAL GABLES, FL 33134
6) Change			
		<del></del>	
Add			
Remove			

f amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)			
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f an amendment provides for an exch	ange, reclassificat	on, or cancellation	on of issued shar	es.
provisions for implementing the ame	ndment if not cont	ained in the ame	ndment itself:	<del></del>
(if not applicable, indicate N/A)				
		·		
	· -		<del></del>	<del></del> -

	AUGUST 31, 2018	
The date of each amendment(s) ac date this document was signed.	option:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendmen	nt file date)
Note: If the date inserted in this b document's effective date on the De	ock does not meet the applicable statutory filing repartment of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ado by the shareholders was/were su	oted by the shareholders. The number of votes cast ficient for approval.	for the amendment(s)
	roved by the shareholders through voting groups. The each voting group entitled to vote separately on the	
	or the amendment(s) was/were sufficient for approve	al
by	(voting group)	
	(voting group)	
The amendment(s) was/were ado action was not required.	oted by the board of directors without shareholder ac	ction and shareholder
☐ The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action	and shareholder
OCTOBER	4, 2018	
Dated	· /////	
. Signature	Hel De	
(By A) selected	rector, president or other officer – if directors or offi , by an incorporator – if in the hands of a receiver, to ed fiduciary by that fiduciary)	
	FRED BERLINER	
	(Typed or printed name of person signing	(3)
	PRESIDENT	
	(Title of person signing)	