Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240000056963)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

S L က် Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

COR AMND/RESTATE/CORRECT OR O/D RESIGN LJ MORTGAGE TEAM INC.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$35.00

Electronic Filing Menu — Corporate Filing Menu

[7]

6134365206

Articles of Amendment 10 Articles of Incorporation οť

LJ MORTGAGE TEAM INC.			
(Name of Corporation as current)	y filed with the Florida Dept. of State)		
F23000003175			
(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation;	Florida Profit Corporation adopts the following amendment(s) to		
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporation," "e". "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	A projessional corporation name must contain the word		
B. Enter new principal office address, if applicable:	127-03 Rockaway Blvd South		
(Principal office address MUST BE A STREET ADDRESS)	Ozone Park, NY 11420		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	127-03 Rockaway Blvd South Ozone Park, NY 11420		
D. If amending the registered agent and/or registered office addinew registered agent and/or the new registered office address Name of New Registered Agent			
(Florida sir	ect address)		
New Registered Office Address:	, Florida		
	(Chy) (Zip Code)		

New Registered Agent's Signature, if changing Registered Agent:

¹To: 18506176380

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

1/4/2024 10:01:27 PST

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:

X_Change	PT	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
l)Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			·
Remove			
4) Change		_	
Add			
Remove			
り Change			
Add			
Remove			
6} Change			
Add		•	
Remove			

1/4/2024 10:31:27 PST

To: 18506176380 Page: 4/5

From, Registered Agents Inc.

Fax: 8134365206

Attach <i>additional sl</i>	ling additional Art leets, if necessary).	(Be specific)	nge(s) here.			•
	, , , , , , , , , , , , , , , , , , , ,	(ter specific)				
				·		
	,	*	·			
				·····		·
					<u> </u>	
					<u>. </u>	·
· · · · · · · · · · · · · · · · · · ·					_	
		·		<u> </u>	· - · · · · · · · · · · · · · · · · · · ·	
						
	 _	· 				
					· -	
an amendment pi	rovides for an exch	ange, reclassific	cation, or cance	Hation of issued	shares,	
<u>provisions for impl</u>	lementing the ame. le, indicate NAT)	<u>ndment if not co</u>	ontained in the	amendment itse	<u>if:</u>	
су посаррасар	w, marcure (822)					
	<u>-</u>					
		P84+				

1/4/2024 10:31:27 PST

To: 18506176380

Page: 5/5

From: Registered Agents Inc.

Fax: 8134365206

The date of each amendment(s) adoption: due this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	late will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder act action was not required.	ion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(8)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	vent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
Dated	
SignatureJANUSSONSSONS	
(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 cou appointed fiduciary by that fiduciary)	FT
Lakhwinder Singh	
(Typed or printed name of person signing)	
Director	
(Title of person signing)	,