

J44356

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

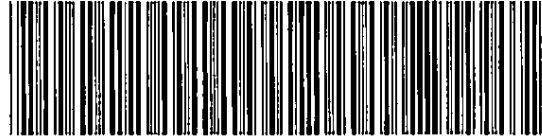
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Nlc & Amend

FILED  
2022 NOV 29 AM 8:03

2022 NOV 29 PM 2:14

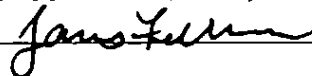
A. RAMSEY  
DEC - 1 2022

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-624

Please use funds from this account: I20210000160 Amount: \$43.75

Authorization Signature: \_\_\_\_\_

TRANSAM SECURITIES, INC. J44356



Business

Document #

\_\_\_ Walk in  
\_\_\_ Pick up time \_\_\_\_\_

\_\_\_ Mail out \_\_\_\_\_ Will wait

\_\_\_ Photocopy

\_\_\_ Certified Copy of Articles of Incorporation

☒ X

\_\_\_ Certificate of Status

**NEW FILINGS**

\_\_\_ Profit  
\_\_\_ Not for Profit  
\_\_\_ Limited Liability  
\_\_\_ Domestication  
\_\_\_ LLLP  
\_\_\_ **CORP**

**AMMENDMENTS**

☒ X Amendment  
\_\_\_ Resignation of R.A. Officer/Director  
\_\_\_ Change of Registered Agent  
\_\_\_ Dissolution/  
\_\_\_ Merger  
\_\_\_ **Conversion**  
\_\_\_ **AFFIDAVID BY FOREIGN CORP.**

**OTHER FILINGS**

\_\_\_ Annual Report  
\_\_\_ Fictitious Name

\_\_\_ APOSTIL

**REGISTRATION/QUALIFICATIONS**

\_\_\_ Foreign filing  
\_\_\_ Statement of AUTHORITY  
\_\_\_ Reinstatement

EXAMINER'S INITIALS: \_\_\_\_\_

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** TRANSAM SECURITIES, INC.  
J44356  
**DOCUMENT NUMBER:** \_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

ARIADNE M. CLINTON

\_\_\_\_\_  
Name of Contact Person

COMPLIANCE EXCHANGE GROUP

\_\_\_\_\_  
Firm/ Company

14 SCOTT AVENUE

\_\_\_\_\_  
Address

SELDEN, NEW YORK 11784

\_\_\_\_\_  
City/ State and Zip Code

aclinton@cxgllc.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ARIADNE M. CLINTON 631 595-5337  
\_\_\_\_\_  
Name of Contact Person at ( ) Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

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

**Mailing Address**

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

**Street Address**

Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-624

Please use funds from this account: I20210000160 Amount: \$43.75

Authorization Signature: \_\_\_\_\_

TRANSAM SECURITIES, INC. J44356

*James F. Allen*

Business

Document #

\_\_\_ Walk in  
\_\_\_ Pick up time \_\_\_\_\_

\_\_\_ Mail out

\_\_\_ Will wait

\_\_\_ Photocopy

\_\_\_ **Certified Copy of Articles of Incorporation**

**X**

\_\_\_ **Certificate of Status**

**NEW FILINGS**

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\_\_\_ Not for Profit  
\_\_\_ Limited Liability  
\_\_\_ Domestication  
\_\_\_ L.L.P.  
\_\_\_ **CORP**

**AMMENDMENTS**

**X** \_\_\_ Amendment  
\_\_\_ Resignation of R.A. Officer/Director  
\_\_\_ Change of Registered Agent  
\_\_\_ Dissolution/  
\_\_\_ Merger  
\_\_\_ **Conversion**  
\_\_\_ **AFFIDAVID BY FOREIGN CORP.**

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\_\_\_ Annual Report  
\_\_\_ Fictitious Name

\_\_\_ APOSTIL

**REGISTRATION/QUALIFICATIONS**

\_\_\_ Foreign filing  
\_\_\_ Statement of AUTHORITY  
\_\_\_ Reinstatement

EXAMINER'S INITIALS: \_\_\_\_\_

Articles of Amendment  
to  
Articles of Incorporation  
of

FILED

TRANSAM SECURITIES, INC.

2022 NOV 29 AM 8:04

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

J44356

(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:

**A. If amending name, enter the new name of the corporation:**

SIGNATURE ESTATE SECURITIES, INC.

*The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

BARRY GAINSBURG, ESQ.

Name of New Registered Agent

10601 ROYAL PALM BLVD.

(Florida street address)

CORAL SPRINGS

33065

New Registered Office Address:

(City)

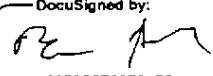
Florida

(Zip Code)

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

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

DocuSigned by:

  
A80F2C5E93B34E0

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.

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 PSD 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                     V        Mike Jones  
  
X Add                         SV        Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	PSD	BARRY M. SMITH	1111 DOUGLAS AVENUE
<input type="checkbox"/> Add			ALTAMONTE SPRINGS, FL
<input checked="" type="checkbox"/> Remove			32714
2) <input type="checkbox"/> Change	CEO	CHRISTOPHER MARYANOPOLIS	2121 AVENUE OF THE STARS
<input checked="" type="checkbox"/> Add			SUITE 1600
<input type="checkbox"/> Remove			LOS ANGELES, CA 90067
3) <input type="checkbox"/> Change	CCO	ERIC ROSEN	2121 AVENUE OF THE STARS
<input checked="" type="checkbox"/> Add			SUITE 1600
<input type="checkbox"/> Remove			LOS ANGELES, CA 90067
4) <input type="checkbox"/> Change	D	BRIAN D. HOLMES	2121 AVENUE OF THE STARS
<input checked="" type="checkbox"/> Add			SUITE 1600
<input type="checkbox"/> Remove			LOS ANGELES, CA 90067
5) <input type="checkbox"/> Change	FINOP	AARON BERT	1111 DOUGLAS AVENUE
<input type="checkbox"/> Add			ALTAMONTE SPRINGS, FL
<input checked="" type="checkbox"/> Remove			32714
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

N/A

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(if not applicable, indicate N/A)

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The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed. SEPTEMBER 1, 2022

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 date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- ☐ The amendment(s) was/were adopted 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)"

AUGUST 24, 2022

Dated \_\_\_\_\_ DocuSigned by: \_\_\_\_\_

Signature Christopher Maryanopolis  
018780FD6046467

(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)

CHRISTOPHER MARYANOPOLIS

\_\_\_\_\_  
(Typed or printed name of person signing)

CEO

\_\_\_\_\_  
(Title of person signing)