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(Re	equestor's Name)	·		
(Ad	ldress)			
(Ad	ldress)			
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(50	ocument Number)			
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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: EXPOCE DOCUMENT NUMBER: P00000077		PRATION				
The enclosed Articles of Amendment and fee are s	ubmitted for filing.					
Please return all correspondence concerning this matter to the following:						
Patricia Rincon						
Name of Contact Person EXPOCREDIT CORP						
1450 Brickell Ave suite 2660						
Address Miami, FL 33131						
	City/ State and Zip Code	2				
info@expocredit.c	com					
E-mail address: (to be u	sed for future annual report	notification)				
For further information concerning this matter, please call:						
Patricia Rincon	at (305	3479222				
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	S43.75 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	Amend	Address ment Section n of Corporations				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILLED SECRETARY OF STATE DIVISION OF CORPORATIONS

EXPOCREDIT CORPORATION

15 FEB 27 PM 1: 07

(Name of Corporation as currently filed with the Florida Dept. of State) P00000077381 (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: 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: Name of New Registered Agent (Florida street address) New Registered Office Address: 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. Signature of New Registered 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	P	Carlos Escobar	1450 Brickell Ave STe 2660
Add			Miami, FL 33131
Remove			
2) Change	P	George Heisel	1450 Brickell Ave Ste 2660
Add			Miami, FL 33131
Remove			
3) Change		 -	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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If an amendment provides for an exchange, reclassification, or cancellation of	issued shares
provisions for implementing the amendment if not contained in the amendme	nt itself:
provisions for imprementing the amendment if not contained in the amendme	
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:	SECRETARY OF STATE OF
date this document was signed.	DIVISION OF CORPORATIONS
Effective date if applicable:	15 FEB 27 PM 1:07 vs after amendment file date)
(no more than 90 da	vs after amenament file date)
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The numby the shareholders was/were sufficient for approval.	nber of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were suf	ficient for approval
by(voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors with action was not required.	out shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without s action was not required.	shareholder action and shareholder
Dated 2/24/2015	
Signature(By a director, president or other officer)	
selected, by an incorporator – if in the han	(/
appointed fiduciary by that fiduciary	
Carlos Escobar	
(Typed or printe	d name of person signing)
President	

Dago 4 of 4

(Title of person signing)