

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)·
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	cument Number)	
•	•	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	POINT	MORTGAGE CON	PORXTION
DOCUMENT NUM	івек: <u></u>	59\$816	
The enclosed Article	s of Amendment and fee ar	e submitted for filing.	
Please return all corr	espondence concerning this	matter to the following:	
,	JOHNNY MA	f Contact Person)	
	OINT MORTGO	462 Confortion n/Company)	<u> </u>
90	195 SUNJET	Address)	r <u>08</u>
_MI	144, FL 33 (City/Sta	31 7 3 ate and Zip Code)	
For further informati	on concerning this matter, p	olease call:	
	f Contact Person) or the following amount:	at (<u>345</u>) <u>274 - 1</u> (Area Code & Daytime Te	3 (4 Elephone Number)
Eliciosed is a clicer i	of the following amount.		
□\$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 Add Amendment and Division of C P.O. Box 632 Tallahassee,	Section Corporations 7	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301	le

Articles of Amendment

to Articles of Incorporation of	FILED
Name of corporation as currently filed with the Florida Dept. of S	OG DEC 21 PM 3: 57
(Document number of corporation (if known)	TEAHASSEE. FLORIDA
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> adopts the following amendment(s) to its Articles of Incorporation:	Profit Corporation

NEW CORPORATE NAME (if changing): (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.") AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC) POINT MONTGAGE COMPONATION WOULD LIKE TO DIANE MARCIARINI TITLE TO OFFICE MANAGER AND CHANGE HER (Attach additional pages if necessary) If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

The date of each amendment(s) adoption:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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)
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signature (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) Tother (Typed or printed name of person signing)
PHESIDENT (Title of person signing)

FILING FEE: \$35