

PO1000041648

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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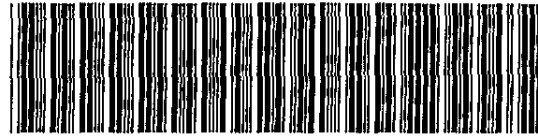
(Business Entity Name)

(Document Number)

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06/17/05--01011--023 \*\*43.75

FILED  
05 JUN 17 AM 9:57  
SECURITY STATE  
TALLAHASSEE FLORIDA  
New

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: credit Management Services, Inc.

DOCUMENT NUMBER: P01000041648

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

Please return all correspondence concerning this matter to the following:

Timothy Quinn

(Name of Contact Person)

Credit Management Services, Inc.

(Firm/ Company)

2260 Palm Beach Lakes Blvd., Suite # 201

(Address)

West Palm Beach, Fl. 33409

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Timothy Quinn

(Name of Contact Person)

at ( 561 ) 312- 1372

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Address**

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

**Street Address**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

Articles of Amendment  
to  
Articles of Incorporation  
of

Credit Management Services, Inc.

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

P01000041648

(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:

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05 JUN 17 AM 9:57  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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)**

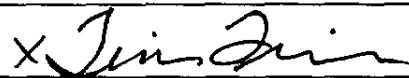
Officers / Directors: Remove Calvin S. Morse/ President

Registered Agent: Remove Calvin S. Morse  
8798 Marlamoor Lane  
West Palm Beach, Fl. 33412

New Registered Agent: Timothy Quinn  
5784 Homeland Road  
Lake Worth, Fl. 33467

I Timothy Quinn am familiar with the obligations  
and duties of the position of registered agent.

Timothy Quinn

X 

(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)

N/A

The date of each amendment(s) adoption: 6/16/05

Effective date if applicable: N/A  
(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.

Signed this 16th. day of June, 2005.

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)

Timothy Quinn / Calvin Morse

(Typed or printed name of person signing)

President

(Title of person signing)

**FILING FEE: \$35**