POI 0000 45273

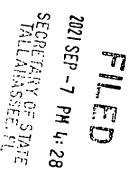
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TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Christensen Financi	ial, Inc.		
DOCUMENT NUM	BER: P01000045273			
	s of Amendment and fee are sul	omitted for filing.		
Please return all corre	espondence concerning this mat	ter to the following:		
	Jenni Smith			
		Name of Contact Person		
	Christensen Financial, Inc.			
		Firm/ Company		
	Firm/ Company 860 N SR 434, Suite 1002			
	Address			
	Altamonte Springs, FL 32714			
		City/ State and Zip Code	;	
	tara@cfimail.net			
	E-mail address: (to be us	sed for future annual report	notification)	
For further informati	on concerning this matter, pleas	se call:		
Jenni Smith		at (407	de & Daytime Telephone Number	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check:	for the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Ar Di P.o	nailing Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amend Division The Co 2415 i	Address ment Section in of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

Articles of Amendment to Articles of Incorporation of

Christensen rinancial, Inc.			
(Name o	f Corporation as currently	y filed with the Florida Dept. of Stat	<u>e</u>)
P01000045273			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
NA			The new
name must be distinguishable and contain	the word "corporation," "c	company," or "incorporated" or the ab	bbreviation "Corp.,"
"Inc.," or Co.," or the designation "C	orp," "Inc," or "Co". $ ilde{A}$	professional corporation name mu	st 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)		860 N SR 434	2021 S SECR TAL
		Suite 1002	EP]
		Altamonte Springs, FL 32714	255 3 3
C. Enter new mailing address, if appli (Mailing address MAY BE A POST (860 N SR 434	ESTA C
(Maning dadress <u>51717 01, A 1 OST OTTTCL DOS</u>)		Suite 1002	Fri 60
		Altamonte Springs, FL 32714	
D. If amending the registered agent an new registered agent and/or the new			<u> </u>
-	NA	-	
Name of New Registered Agent			***
	860 N SR 434, Suite 1002		
		eet address)	22714
New Registered Office Address:	Altamonte Springs	, Florida	
		(City)	(Zip Code)
N			
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	nanging Registered Agent ered agent. I am familiar i	<u>:</u> with and accept the obligations of the _l	position.
, , , , , , , , , , , , , , , , , , , ,	,,		
	<u>. </u>		
	Signature of New R	egistered 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)

Example:

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.

X Change	PT John Do	<u>ee</u>	
X Remove	V <u>Mike Jo</u>	nes	
X Add	<u>SV</u> <u>Sally Sn</u>	<u>nith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change	·****		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

amending or adding additional Artitach additional sheets, if necessary).	(Be specific)			
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			-	
an amendment provides for an exc	hange, reclassification, or	r cancellation of is	ssued shares,	
provisions for implementing the am	endment if not contained	in the amendmen	it itself:	
(if not applicable, indicate N/A)				
				
			<u></u>	
		 -	<u> </u>	
			-	

The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment fi	le date)
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requ Department of State's records.	irements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without	shareholder action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for sufficient for approval.	the amendment(s)
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The or each voting group entitled to vote separately on the un	fellowing statement wndment(s):
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/01/202 Dated	21	
selec	director, president or other officer – if directors or office ted, by an incorporator – if in the hands of a receiver, truinted fiduciary by that fiduciary)	rs have not been stee, or other court
	Carol Christensen	
	(Typed or printed name of person signing)	
	Sr. Vice President	
	(Title of person signing)	

. . .