P03000042584

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(Re	questor's Name)	
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COVER LETTER

Division of Corporations
NAME OF CORPORATION: Mortgage Lending Associates, Inc., DOCUMENT NUMBER: P0300042584
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following: Jason Aplan Name of Contact Person Associates, Inc. Firm/ Company Soo SE Mizner Blud A507 Address City/ State and Zip Code Laplan Mortgages. Co. Email address: (to be used for future annual report notification)
For further information concerning this matter, please call: Jason

Mailing Address

TO: Amendment Section

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

is enclosed)

Articles of Amendment

t	0	
Articles of I	ncorporation	
Mortgage Lendi (Name of Corporation as curren	of	ates Inc
(Name of Corporation as curren	tly filed with the Florida Dep	t. of State) \square
PO 3 00004	2584	
(Document Number	of Corporation (if known)	1.50
Pursuant to the provisions of section 607,1006, Florida Statutes, thi	s Florida Profit Corporation a	lopts the following amendment(s) to
ts Articles of Incorporation:	•	
•		ggi ka
A. If amending name, enter the new name of the corporation:		<u> </u>
M +		-, U1
raplan roriga	ge Com	pany The new
name must be dislinguishable and contain the word "corporation,".		
Inc.," or Co.," or the designation "Corp." "Inc," or "Co".		ame must contain the word
chartered," "professional association," or the abbreviation "P.A"		
3. Enter new principal office address, if applicable:	500 SE	Mizner Blud.
Principal office address <u>MUST BE A STREET ADDRESS</u>)	A-507	
	Boca Ro	on FL 33432
	DUCA TO	1 - 12 (30
T. Enter new mailing address, if annlicable:	~ ^ ^	F. Mi - DI

-	new mailing address, if applicable: g address MAY BE A POST OFFICE BOX)	_5	00	SE'	Mi
`	· · · · · · · · · · · · · · · · · · ·	A	··	•	

ASO7 Boca Batan FL 33432

D.	If amending the registered agent and/or registered office address in Florida, enter the name of the	<u>1e</u>
	new registered agent and/or the new registered office address:	

Name of New Registered Agent

Soo SE Mizner Blud A507

(Florida street address)

New Registered Office Address: Boca Ration

Florida 33432

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

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

Signature of New Registered Agent if changing

Check if applicable

 \square 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 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	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jos	nes	
X Add	<u>sv</u>	Sally Sn	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change				
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change				÷
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

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provis	sio <u>ns for impl</u>	ementing the	amendme	ent if not co	ontained in	the amendr	nent itself:		
(ij	i'not applicabi	le, indicate N/2	d)						
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The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date <u>if applicable</u> : Q 59 P	
Effective date if applicable: Q > 9 \(\rho\) (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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ 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):	2024 JL ÀLL
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
40	
Dated June 15th 2029	١٠١
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)	
Jason Kaplan	
(Typed or printed name of person signing)	
President_	
(Title of person signing)	