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To:

Division of Corporations

: (850)205-0380

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)634-3694

Fax Number

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## **BASIC AMENDMENT**

FINANCIAL LENDING SOLUTIONS, CORP.

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

T BROWN JUL - 9 2004



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 8, 2004

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FINANCIAL LENDING SOLUTIONS, CORP. 340 WEST 19TH ST., #3 HIALEAH, FL 33010

SUBJECT: FINANCIAL LENDING SOLUTIONS, CORP.

REF: P04000081812

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The incorporator(s) cannot be amended or changed. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Darlene Connell Document Specialist FAX Aud. #: H04000140763 Letter Number: 404A00043815

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

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Articles of Amendment	
to to	
Articles of incorporation of	
Financial Lending Solutions, Corp. 200 2	S
(Name of corporation as cuffernly filed with the Florida Dopt. of State)	<del></del>
P04000081812	3,4
(Document number of corporation (if known)	, .s
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:	 Z
NEW CORPORATE NAME (If changing);	
(must contain the word "corporation," "company," or "neorporated" or the abbreviation "Corp.," "Inc.," or "Co.")	
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	
Anticle Six: Is herein charged to rend rigister Sent	
BANDAMA B. Souzafez. 340W 19 street #3 Haleah, FL33010	
ntiele Enti Bound on Director shall be an perlow	
Rubia B. Sonzalez. 340 W. 19 Street #3 Hideon Fr 33010	<b>,</b>
nticle Vine: Is benefichinged to next President:	
Subrus B. Sourceter Vice President: Bribus B. Dovertor.	
	,
(Attach additional pages if necessary)	
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions	
for implementing the smendment if not contained in the amendment itself. (if not applicable, indicate N/A)	
(continued)	

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The date of each amendment(s) adoption: 07-07-04
Effective date if antilicable:  (no more than 90 days after amendment file date)
Adeption 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/wate 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
(voing 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 74 day of July 3004
Signature Esthe Laush
(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 ther fiduciary)
Esther SANCIA
(Typed or printed name of person algoring)  Pre S. dec. T
(Title of person signing)

Filing Fee: \$35

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## CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

(Name of Corporation)

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THE ARTICLES OF INCORPORATION, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

REGISTERED AGENT

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