P04000152979

(Requestor's Name)

_____

(Address)

_____

(Address)

_____

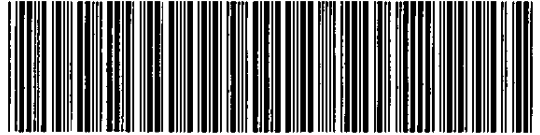(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____

(Business Entity Name)

_____

(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

900159846379

09/02/09--01018--020   **43.75

FILED
2009 SEP -2 PM 3: 50
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

ADR
9/4/09

COVER LETTER

NAME OF CORPORATION: TREASURE COAST MORTGAGE SERVICES INC

DOCUMENT NUMBER: P04000152979

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

Please return all correspondence concerning this matter to the following:

MICHELLE DURANT
_____
Name of Contact Person

TREASURE COAST MORTGAGE SERVICES INC
_____
Firm/ Company

522 SW PORT ST LUCIE BLVD
_____
Address

PORT ST LUCIE, FL 34953
_____
City/ State and Zip Code

_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHELLE DURANT   at (772) 344-0306
_____
Name of Contact Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ $35 Filing Fee   ☐ $43.75 Filing Fee &   ☑ $43.75 Filing Fee &   ☐ $52.50 Filing Fee
                     Certificate of Status   Certified Copy   Certificate of Status
                                                (Additional copy is enclosed)   Certified Copy
                                                                          (Additional Copy is enclosed)

Articles of Amendment
to
Articles of Incorporation
of

TREASURE COAST MORTGAGE SERVICES, INC.

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

P04000152979

(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:

A. If amending name, enter the new name of the corporation:

_____*The new*
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must 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)

522 SW PORT ST LUCIE BLVD

PORT ST LUCIE, FL 34953

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

PO BOX 8089

PORT ST LUCIE, FL 34985

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

Name of New Registered Agent: _____

New Registered Office Address: _____
(Florida street address)

_____. Florida_____
(City)   (Zip Code)

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

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

_____
Signature of New Registered Agent, if changing

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)

Title	Name	Address	Type of Action
P	MICHELLE DURANT	522 SW PORT ST LUCIE BLVD PORT ST LUCIE, FL 34953	☐ Add ☑ Remove
D	IMAD S QUBAIN	522 SW PORT ST LUCIE BLVD PORT ST LUCIE, FL 34953	☐ Add ☑ Remove
PS	RICHARD BARRY	97 S SEWALL PT RD SEAWALLS POINT, FL 34996	☑ Add ☐ Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary).   (Be specific)

_____

_____

_____

_____

_____

_____

_____

_____

F. If an amendment provides for an 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)

_____

_____

_____

_____

_____

_____

The date of each amendment(s) adoption: 8/20/2009

(date of adoption is required)

Effective date **if applicable**: 08/20/2009

(no more than 90 days after amendment file date)

Adoption of Amendment(s)   **(CHECK ONE)**

☑ 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):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by OFFICERS   ."

(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.

Dated 8/28/09

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)

RICHARD BARRY

(Typed or printed name of person signing)

PRESIDENT, SECRETARY

(Title of person signing)