

P04000156590

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08 NOV - 7 PM 2:52

CLERK OF STATE  
TALLAHASSEE, FLORIDA

Not Amended  
\* eus  
\* eus  
or 1/1/11

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** SOLUTION 1 MORTGAGES INC

**DOCUMENT NUMBER:** P04000156590

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

Please return all correspondence concerning this matter to the following:

DARREN RAGOONANAN  
(Name of Contact Person)

SOLUTION ONE INC  
(Firm/ Company)

4801 S. UNIVERSITY DRIVE, SUITE 219  
(Address)

DAVIE FL 33328  
(City/ State and Zip Code)

For further information concerning this matter, please call:

DARREN RAGOONANAN at (954) 236 9900  
(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 &  
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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 24, 2008

DARREN RAGODNANAN  
4801 S. UNIVERSITY DR., SUITE 219  
DAVIE, FL 33328

SUBJECT: SOLUTION 1 MORTGAGES INC  
Ref. Number: P04000156590

We have received your document for SOLUTION 1 MORTGAGES INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

The document number of the name conflict is P07000111801.

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

If you have any questions concerning the filing of your document, please call (850) 245-6916.

Carol Mustain  
Regulatory Specialist II

Letter Number: 608A00054976

Articles of Amendment  
to  
Articles of Incorporation  
of

Solution 1 Mortgage S, Inc  
(Name of Corporation as currently filed with the Florida Dept. of State)

P04000156590

(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:

Solution one South Florida, Inc.

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)

4801 S. University Dr.  
Suite #219  
DAVIE, FL 33328

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8384 SW 42ND CT  
DAVIE FL 33328

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:

Darren Ragoonanan

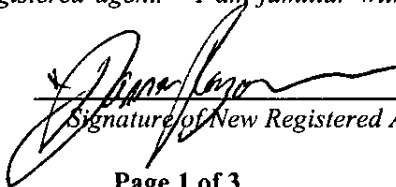
New Registered Office Address:

4801 S. University Dr. #219  
(Florida street address)

DAVIE, Florida 33328  
(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
P	SANDRA GIRALDO	8384 SW 42ND CT DAVIE FL 33328	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
VP	Darren Agoodnanon	8384 S.W. 42nd CT DAVIE, FL 33328	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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

PRESIDENT PERCENTAGE OF OWNERSHIP 90%  
(SANDRA GIRALDO)

VICE PRESIDENT PERCENTAGE OF OWNERSHIP 10%  
(DARREN AGOODNANON)

**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: 10/29/2008

Effective date if applicable: 10/29/2008  
(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 \_\_\_\_\_."  
(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 10/29/08

Signature Sandra Gualdo  
(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)

Sandra Gualdo  
(Typed or printed name of person signing)

PRESIDENT  
(Title of person signing)