PU5000063319

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Bibby Financial Services, Inc. DOCUMENT NUMBER: P05000063319 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Vicki L. Heller Name of Contact Person Bibby Financial Services, Inc. Firm/ Company 600 TownPark Lane, Suite 450 Address Kennesaw, Georgia 30144 City/ State and Zip Code vheller@bibbyusa.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call; at (678) 385-9682

Area Code & Daytime Telephone Number Vicki L. Heller Name of Contact Person 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 Certified Copy (Additional Copy enclosed) is enclosed)

Mailing Address

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

Articles of Amendment to Articles of Incorporation of

Bibby Financial Services, Inc.

(Name of Corporation as currentl	v filed with the Florida Dept. of State	<u>e</u>)	
1205000063319			
(Document Number o	f Corporation (if known)		
Pursuant to the provisions of section 607,1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the	following amendment(s) tc
A. If amending name, enter the new name of the corporation:			
eCapital Commercial Finance Corp.		The new	
name must be distinguishable and contain the word "corporation," "Co", " or Co.," or the designation "Corp," "Inc," or "Co", " chartered," "professional association," or the abbreviation "P.A."	company," or "incorporated" or the ab A professional corporation name mus	breviation "Corp.," et contain the word	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
G. C. C. Street March Townsteeld			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		<u> </u>	t
	44.00 A		<u>.</u>
			Π
D. If amending the registered agent and/or registered office add	ress in Florida, enter the name of the	U	ラ
new registered agent and/or the new registered office address	<u>:</u>		
Name of New Registered Agent		<u></u>	
		·•	
(Florida str	ect address)		
New Registered Office 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 v		osition	
Thereby decept the approximation at the grande of agents.	· · · · · · · · · · · · · · · · · · ·		
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)

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 Jo	nes	
X Add	<u>sv</u>	Sally Sr	<u>nith</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				

If amending or adding additional Art	ucies, enter change(s) here:
(Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
<u></u>	

If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amo	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
1	
	
	

May 6, 2020
The date of each amendment(s) adoption:
Effective date if applicable:
(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 not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
■ 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)
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)
Kimberly F. Withrow
(Typed or printed name of person signing)
EVP. Secretary
(Title of person signing)