P06000063341

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

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Office Use Only

FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 28, 2011

ANTHONY G. COLEMAN, JR.
IT MANAGEMENT, INC.
4171 W. HILLSBORO BLVD, STE 8
COCONUT CREEK, FL 33073

SUBJECT: DEBT LIQUIDATION SERVICES, INC.
Ref. Number: P06000063341

We have received your document for DEBT LIQUIDATION SERVICES, INC. and your check(s) totaling $350.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 711A00026623

RECEIVED 11 DEC -5 AM 8: 52 [ILLEGIBLE STAMP] TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DEBT LIQUIDATION SERVICES, INC.

DOCUMENT NUMBER: P06000063341

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

Please return all correspondence concerning this matter to the following:

ANTHONY G. COLEMAN, JR.
Name of Contact Person

DEBT LIQUIDATION SERVICES, INC.
Firm/ Company

4171 W. HILLSBORO BLVD., SUITE 8
Address

COCONUT CREEK, FL 33073
City/ State and Zip Code

fsonara@federatedfinancial.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY G. COLEMAN, JR.   at (954   ) 354-2785

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

Articles of Amendment
to
Articles of Incorporation
of

DEBT LIQUIDATION SERVICES, INC.

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

P06000063341

(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)

4171 W. HILLSBORO BLVD.

SUITE 8

COCONUT CREEK, FL 33073

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

4171 W. HILLSBORO BLVD.

SUITE 8

COCONUT CREEK, FL 33073

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:

4171 W. HILLSBORO BLVD., #8

(Florida street address)

COCONUT CREEK _____ , Florida 33073

(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

Page 1 of 4

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.
(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an additional sheet.)

<u>Title(s)</u>   <u>Name</u>   <u>Address</u>

1)_____   _____   _____
                                                    _____
                                                    _____

2)_____   _____   _____
                                                    _____
                                                    _____

3)_____   _____   _____
                                                    _____
                                                    _____

4)_____   _____   _____
                                                    _____
                                                    _____

5)_____   _____   _____
                                                    _____
                                                    _____

6)_____   _____   _____
                                                    _____
                                                    _____

If REMOVING an officer and/or director, please list the title(s) and name of the officer/director to be removed:

<u>Title(s)</u>   <u>Name</u>   <u>Title(s)</u>   <u>Name</u>

1)_____   _____   4)_____   _____

2)_____   _____   5)_____   _____

3)_____   _____   6)_____   _____

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: **10-27-2011**

(date of adoption - required)

Effective date if applicable: _____

(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.
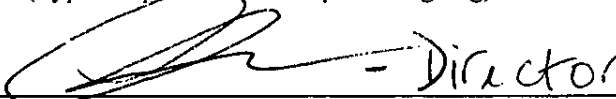
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated **11-08-2011**

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)

ANTHONY G. COLEMAN, JR.

(Typed or printed name of person signing)

_____ – Director

(Title of person signing)

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