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(Do	cument Number)	
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07 JUL 23 PM 1:01

SECRETARY OF STATE
TALL AHASSEE



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 16, 2007

JULIE M. WILLIAMSON COMPLETE CREDIT CORRECTIONS, INC. 9022 W ATLANTIC BLVD #217 CORAL SPRINGS, FL 33071

SUBJECT: COMPLETE CREDIT CORRECTIONS, INC.

Ref. Number: P07000070060

We have received your document for COMPLETE CREDIT CORRECTIONS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please list the street address of each officer/director.

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 Document Specialist

Letter Number: 007A00044944

07 JUL 23 AM 8: 00

COVER LETTER

TO: Amendment Section **Division of Corporations**

	Λ	. 1	,
NAME OF COR	PORATION: (DM)	e Credit Correction	s, Inc.
DOCUMENT N	JMBER: 707000	070060	
The enclosed Artic	cles of Amendment and fee a	re submitted for filing.	•
Please return all co	orrespondence concerning thi	s matter to the following:	
	Julie M. W.	Illiamson of Contact Person)	····
	Complete Credit	Company)	
	9022 W Atla	Antic Blud. #217 (Address)	
	Coral Springs	3. 7L 3307/ -	·
For further inform	ation concerning this matter,		
Julie u	Villiamsion	at (954) 510	
,	e of Contact Person)	(Area Code & Daytim	e Telephone Number)
Enclosed is a chec	k for the following amount:		
□ \$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 A	ddress	Street Address	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment	FILED
Articles of Incorporation	07 JUL 23 PM 1:01
 Complete Credit Corrections	SECRETARY OF STATE TALL CHASSEE, FLORIDA
(Name of corporation as currently filed with the Florida Dep	ot. of State)
P07000070060	
(Document number of corporation (if known)	

NEW CORPORATE NAME (if changing):

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")

(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED (OTHER THAN NAME CHANGE) Indicate Article Number(s)

and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)

Norticle II + P.O. Box 771072 - Goad w. Attendic Blvd #317

Coral Springs, 7L 33077 | Coral Springs, 7L 3307/

Mailing address | Physical address |

Norticle V - Julie Williamson - President |

P.O. Box 771072 - Goad w. Attendic Blvd #317

Coral Springs, 7L 33077 | Coral Springs, 7L 3307/

Mailing address | Physical address |

(Attach additional pages if necessary)

If an amendment provides for 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)

(continued)

The date of each amendment(s) adoption:
Effective date if applicable: (no more than 90 days after amendment file date)
Adoption 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/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 an shareholder action was not required.
Signature (Byla 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)
Typed or printed name of person signing)
President_
(Title of person signing)

FILING FEE: \$35