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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: _	RATION: PREFERRED FORECLOSURE CLEARINGHOUSE, INC				
DOCUMENT NUMBER:	P07000072684				
The enclosed Articles of Amendm	ent and fee are submitted for filing.				
Please return all correspondence co	ncerning this matter to the following:				
	ELLIS WAYNE JENKINS				
	Name of Contact Person				
	PREFERRED FORECLOSURE CLEARINGHOUSE, INC.				
	Firm/ Company				
	P.O. BOX 6751				
	Address				
	LAKELAND, FL 33807				
	City/ State and Zip Code				
	wayne@americanheroes.com				
E-mail	address: (to be used for future annual report notification)				
For further information concerning  Ellis Wayne Jenki					
Name of Contact P					
Enclosed is a check for the following	ng amount made payable to the Florida Department of State:				
Certi	S Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)				
8/16 ginal and Mailing Addres Amendment Sec Ch Sent Division of Corp P.O. Box 6327 Tallahassee, FL	orations  Amendment Section  Division of Corporations  Clifton Building				

## Articles of Amendment

to

## Articles of Incorporation



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\_, Florida\_

(Zip Code)

## PREFERRED FORECLOSURE CLEARINGHOUSE, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P07000072684 (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: 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." 123 W. BELVEDERE ST B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) LAKELAND, FL 33803 C. Enter new mailing address, if applicable: P.O. BOX 6751 (Mailing address MAY BE A POST OFFICE BOX) LAKELAND, FL 33807 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: N/A Name of New Registered Agent (Florida street address)

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

New Registered Office Address: \_\_\_

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

(City)

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove			- A - A - A - A - A - A - A - A - A - A
3)Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			4-14-14-14-14-14-14-14-14-14-14-14-14-14
5) Change		N/A	
Add			
Remove			
6) Change .		N/A	
Add	·		- APP or PPP - condition - conjugate the control of
Remove			

•	(Be specific)
NOT APPLICABLE	
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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orovisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
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 w document's effective date on the Department of State's records.	ill not be listed as the
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.	
DatedSignature	
(By a director, president or other officer at director 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)	
ELLIS WAYNE JENKINS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	<del></del>