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(Re	equestor's Name)	<u> </u>
(110	-q=0010. 0 (101110)	
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(Do	ocument Number)	
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C. BRUMBLEY JAN - 5 2022

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	TION: DCF	IL MORTE	SEE CORP.
DOCUMENT NUMBER	P0700	0109579	·
The enclosed Articles of A	Imendment and fee are su	bmitted for filing.	SECEIVED
Please return all correspor	dence concerning this ma	tter to the following:	2022 JAN -3 PM 2:55
	BE	Name of Contact Person	SECRETARY NO DELL
		Firm/ Company	
	2848 1	NONROE STRE Address	£1
	HOLLYWO	00, FL 320	v
		City/ State and Zip Code	
	berke be	rkocal.com sed for future annual report	notification)
	12-man address, to be as	red for fattire annual report	nothicutions
For further information co	ncerning this matter, pleas	se call:	
BERY (OCAL	at (56)	704-6478
Name of C	ontact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check for the	e following amount made	payable to the Florida Depa	irtment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amendi	Address ment Section n of Corporations x 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

Articles of Amendment to Articles of Incorporation of

OCAL MORTGAGI	E CORP.
	filed with the Florida Dept. of State)
<u>P070001095</u>	79
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
OCAL CAPITAL CO	
name must be distinguishable and contain the word "corporation," "co". Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	2848 MONROE STREET
	HOLLYWOOD, FL 32020
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	2848 MONROE STREET
	HOLLYWOOD, FL 33020
D. If amending the registered agent and/or registered office address:	
Name of New Registered Agent BEEK O	CAL
<u>2848 Mo</u> (Florida stre	
New Registered Office Address: Florer WOO	o, Florida 33020
	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	
	wistered Avent, if changing

Check if applicable

 \square 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> <u>John</u>	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	BERK OCAL	2848 MONPOF ST.
Add			Hourmood, FL 33000
Remove			
2) Change			
Add			· · · · · · · · · · · · · · · · · · ·
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Ramara			

	i. (Be specific)
	-
	1 - 25 - 41
t an amendment provides for an ex-	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
(2)	
() 11,	
7,,	

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	1:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		D
	(no more than 90 days after amendment file da.	le)
Note: If the date inserted in this block document's effective date on the Departme	pes not meet the applicable statutory filing requirement of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted by action was not required.	y the incorporators, or board of directors without share	eholder action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the a t for approval.	mendment(s)
	by the shareholders through voting groups. The follow oting group entitled to vote separately on the amendm	
"The number of votes cast for the	amendment(s) was/were sufficient for approval	
bv		
-	(voting group)	
selected, by ar	president or other officer – if directors or officers have a incorporator – if in the hands of a receiver, trustee, officery by that fiduciary)	
 .	(Typed or printed name of person signing)	
	PRESIDEMY	
	(Title of person signing)	

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