P08000017817

(Requestor's Name)
(Address)
(Address)
· · ·
(City/State/Zip/Phone #)
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(Document Number)
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SECRETARY OF STATE

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RECEIVED 2009 APR 15 AM 8: 00

FLORIDA DEPARTMENT OF STATE Division of Corporations TALLAHASSEE, FLORIDA

April 6, 2009

HUMBERTO QUILEZ MONTERINY HOME LOANS 10251 SW 72 STREET, STE 104 MIAMI, FL 33173

SUBJECT: MONTERINY CREDIT CONSULTANT CO

Ref. Number: P08000017817

We have received your document for MONTERINY CREDIT CONSULTANT CO and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the file date of the document that is being corrected. As the time period for filing Articles of Correction has expired, an amendment to the articles of incorporation could be filed at this time.

We are enclosing the proper form(s) with instructions for your convenience.

The president must sign form.

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

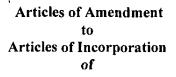
Letter Number: 409A00011416

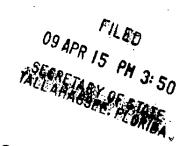


TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Monteriny C	Credit Consultant Co	F
DOCUMENT NUMBER: P08000017	817	<u>.</u>
The enclosed Articles of Amendment and fee ar	e submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
	mberto Quílez	
(Name of	f Contact Person)	
	nteriny Home Loans	
(Firm	n/ Company)	
10251 SW	/ 72 Street, Suite 104	
(Address)	
Miam	ni, Florida 33173	
(City/ Sta	ate and Zip Code)	
For further information concerning this matter, p	please call:	
Humberto Quilez / Agi Quilez (Name of Contact Person)	at (786) 366-2131 (Area Code & Daytime T	elephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\times \$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 Circ	:le

Tallahassee, FL 32301





MONIERINY (Name of Corporation as c		SULTANT CO the Florida Dept. of St	# ate)
P	08000017817		-
	Number of Corporat		
Pursuant to the provisions of section 607, following amendment(s) to its Articles of Ir		ites, this Florida Profit	Corporation adopts th
A. If amending name, enter the new nam	ne of the corporatio	o <u>n:</u>	
Monteriny Home Loans Co			
The new name must be distinguishable "incorporated" or the abbreviation "Corp" "Co". A professional corporation rassociation," or the abbreviation "P.A."	p., " "Inc.," or Co.	.," or the designation	"Corp," "Inc," or
B. Enter new principal office address, if applicable:		10251 SW 72 Street,	Suite 104
(Principal office address <u>MUST BE A STR</u>	REET ADDRESS)	Miami, Florida 33173	·····
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		10251 SW 72 Street, S Miami, Florida 33173	uite 104
D. If amending the registered agent and/ new registered agent and/or the new r	egistered office add		ter the name of the
Name of New Registered Agent:	Ari Quilez		_
N. B	3663 SW 150 C		_
New Registered Office Address:	(Flori	ida street address)	
	<u>Miami</u>	(City)	, Florida_33185_ (Zip Code)
New Registered Agent's Signature, if chan I hereby accept the appointment as registed position.			ot the obligations of the

Signature of New Registered Agent, if changing

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)

<u>Title</u>	Name	Address	Type of Action
<u>P</u>	Humberto Quilez	3663 SW 150 Court	☑ Add
		Miami, Florida 33185	Remove
<u>VP</u>	Ana Mary Vazquez	3663 SW 150 Court	■ 🖾 Add
		Miami, Florida 33185	☐ Remove
			☐ Add
			☐ Remove
	g or adding additional Articles, enter clional sheets, if necessary). (Be specific		
- (anden adam	——————————————————————————————————————	·/	<u> </u>
		····	
			-
	dment provides for an exchange, recla- for implementing the amendment if no		
	pplicable, indicate N/A)	or contained in the amendment is	.sen.

The date of each amendment(s) adoption: $\frac{4-13-09}{}$				
Ef	fective date <u>if applicable</u> :			
		(no more than 90 days after amendment file date)		
Ad	loption of Amendment(s)	(CHECK ONE)		
	The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.		
		re approved by the shareholders through voting groups. The following statement of 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)		
	•	(voting group)		
Ø	The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder		
	The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder		
	Dated	4/18/09		
	Signature	(Klif		
	(By sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)		
		Humberto arilez		
		(Typed or printed name of person signing)		
		President		
		(Title of person signing)		