P0800011004

(Re	questor's Name)	
(Ad	dress)	
——(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ `Certificates	s of Status
Special Instructions to	Filing Officer:	





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Amenda

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	FIRST CREDIT FINANCIAL	_, INC.	
DOCUMENT NUMI	3ER:	P08000111004		
The enclosed Articles	of Amendment and fee	are submitted for filing.		
Please return all corre	spondence concerning th	is matter to the following:		
	KA ⁻	THY HENDRICKSON		
	1	Name of Contact Person		
	FIRST O	CREDIT FINANCIAL, INC.		
	1 11 15 1	Firm/ Company		
	2201 NIW CORP	DRATE BOULEVARD - SUITE :	205	
	ZZUT NVV CORFO	Address	200	
	BOCA F	RATON, FLORIDA 33431		
	(City/ State and Zip Code		
	Kathy	/@cdcdebt.com		
	E-mail address: (to be use	/@cdcdebt.com ed for future annual report notification)		
For further information	n concerning this matter,	nlease call:		
	-	•	4E 0000	
	YEY SCHOLL Contact Person	at (<u>561</u>) <u>44</u> Area Code & Daytime Tele	15-8000 enhone Number	
		·	•	
Enclosed is a check for	r the following amount r	nade payable to the Florida Depart	ment 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 Addre	<u>ess</u>	Street Address		
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations Clifton Building		
P.O. Box 6327 Tallahassee, FI		2661 Executive Center Circle	e	

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE **Division of Corporations**

May 24, 2011

KATHY HENDRICKSON FIRST CREDIT FINANCIAL, INC. 2201 NW CORPORATE BOULEVARD - STE. 205 BOCA RATON, FL 33431

SUBJECT: FIRST CREDIT FINANCIAL, INC

Ref. Number: P08000111004

We have received your document for FIRST CREDIT FINANCIAL, 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):

The document must also contain the address of the registered agent which must be at a Florida street address.

The document must have original signatures.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 411A00012773

Articles of Amendment **Articles of Incorporation** of

FIRST CREDIT FINANCIAL, INC.

Manager of the control of the contro	
•	
	Articles of Amendment to Articles of Incorporation of EDIT FINANCIAL, INC. rrently filed with the Florida Dept. of State)
	to
	Articles of Incorporation of
	EDIT FINANCIAL, INC.
(Name of Corporation as cu	rrently filed with the Florida Dept. of State)
P(08000111004
(Document N	umber of Corporation (if known)
Pursuant to the provisions of section 607.19 amendment(s) to its Articles of Incorporation	006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following a:
A. If amending name, enter the new name	of the corporation:
	The new
abbreviation "Corp.," "Inc.," or Co.," or t	n the word "corporation," "company," or "incorporated" or the the designation "Corp," "Inc," or "Co". A professional corporation professional association," or the abbreviation "P.A."
B. Enter new principal office address, if a	oplicable:
(Principal office address <u>MUST BE A STRI</u>	
C. Entaunau mailing address if analisah	Ja.
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)	
	· ·
D. If amending the registered agent and/o new registered agent and/or the new re	r registered office address in Florida, enter the name of the
now registered agent und/of the new re	
Name of New Registered Agent:	KATHY HENDRICKSON
New Registered Office Address:	Boca Raton, Florida 33431 (City) (Zip Code)
	Boca Raton Florida 33431
	(City) (Zip Code)
New Registered Agent's Signature, if chan	ging Begistered Agent.
	l agent. I am familiar with and accept the obligations of the position.
	Kroner Hendring
-	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>Name</u>	<u>Address</u>	Type of Action
ADAM HAYAT	2201 NW CORPORATE BLVD. SUITE 205 BOCA RATON, FL 33431	☐ Add ☐ Remove
KATHY SANDIDGE HENDE	2201 NW CORPORATE BLVD. SUITE 205 BOCA RATON, FL 33431	☑ Add ☐ Remove
		☐ Add ☐ Remove
aattional sneets, ij necessary). (Ве spec	ngic)	
ons for implementing the amendment if		
		.
	ADAM HAYAT KATHY SANDIDGE HENDE ding or adding additional Articles, entereditional sheets, if necessary). (Be specially specially sheets) and the special sheets are specially sheets.	ADAM HAYAT 2201 NW CORPORATE BLVD. SUITE 205 BOCA RATON, FL 33431 2201 NW CORPORATE BLVD. SUITE 205 BOCA RATON, FL 33431 2201 NW CORPORATE BLVD. SUITE 205 BOCA RATON, FL 33431 ding or adding additional Articles, enter change(s) here: dditional sheets, if necessary). (Be specific)

i ne date of each amend	mehl(s) adoption: WAT 10, 2011 (date of adoption is required)
Effective date <u>if applical</u>	
	(no more than 90 days after amendment file date)
Adoption of Amendmen	t(s) (CHECK ONE)
	as/were adopted by the shareholders. The number of votes cast for the amendment(s as/were sufficient for approval.
	is/were approved by the shareholders through voting groups. The following statement ovided for each voting group entitled to vote separately on the amendment(s):
"The number of v	otes cast for the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
action was not require	s/were adopted by the incorporators without shareholder action and shareholder
Dated_l	re
	ADAM HAYAT
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)