P09000038134

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE LOA	IN MOD SOLUTION, INC.	
DOCUMENT NUMBER: P09000038134		
The enclosed Articles of Amendment and f	ee are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
DEXTER KING		
	Name of Contact Pe	rson
THE LOAN MOD S	OLUTION, INC.	
	Firm/ Company	
825 N. PINE HILLS	RD.	
	Address	
ORLANDO, FL 328	08	
	City/ State and Zip (Code
FCCWWJD@GMAIL.CO	M	
E-mail address:	(to be used for future annual rep	port notification)
For further information concerning this mat	ter, please call:	
DEXTER KING	at (⁴⁰⁷	468-0077
Name of Contact Person	Area	Code & Daytime Telephone Number
Enclosed is a check for the following amount	nt made payable to the Florida C	Department of State:
■ \$35 Filing Fee □\$43.75 Filing Certificate of		Certificate of Status

Articles of Amendment to Articles of Incorporation

FILED

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THE LOAN MOD SOLUTION, INC. (Name of Corporation as currently filed with the Florida Dept; of State P09000038134 (Document Number of Corporation (if knows) 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: KING PHARMA GROUP, INC 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." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent: 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

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	PT	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			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Articles, enter change(s) here:			
(Attach additional sheets, if necessary). (Be specific)			

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If an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,		
provisions for implementing the ame	ndment if not contained in the amendment itself:		
(if not applicable, indicate N/A)			
<u></u>			
and the second s			

The date of each amendment(s) adoption:	, if other than the
uste this document was signed.	
Effective date if applicable:	
(no more than 90 days c	after amendment file date)
Note: If the date inserted in this block does not meet the applicable st document's effective date on the Department of State's reconfic	atutory filing requirements, this date will not be listed as
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number by the shareholders was/were sufficient for approval.	r of votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through vo must be separately provided for each voting group entitled to vote sequences.	
"The number of votes cast for the amendment(s) was/were suffic	ient for approval
(voting group)	17
(voting group)	
The amendment(s) was/were adopted by the board of directors withou action was not required.	t shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sha action was not required.	reholder action and shareholder
10-5-2015	
Dated	
Signature With Sy.	
(By a 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)	
DEXTER KING	
(Typed or printed name o	f person signing)
PRESIDENT	
(Title of pers)	on cimina)