P09000049264

(Re	questor's Name)	
(Ad	dress)	
· (Ad	dress)	•
(Cit	ty/State/Zip/Phone	#)
PICK-UP	MAIT	MAIL '
: (Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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TALL ARASSEC, FLINHB. SEGMENTARY OF STATE



EXAMINER

COVER LETTER

.TO: Amendment Section
Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: DOCUMENT NUMBER:		CREDIT IN DEMAND, II	NC.
		P09000049264	
The enclosed Articles of	f Amendment and fee a	are submitted for filing.	
Please return all corresp	ondence concerning th	is matter to the following:	
		ARBARA IGLESIAS	
		REDIT IN DEMAND Firm/ Company	
-1	2222 PONCE	DE LEON BLVD PENTHOUSE Address	<u> </u>
		AL GABLES, FL 33134 City/ State and Zip Code	
	CREDITINDE E-mail address: (to be use	EMAND@YAHOO.COM Ed for future annual report notification)	
For further information	concerning this matter,	please call:	
	RA IGLESIAS ontact Person	at (305)4 Area Code & Daytime Tel	41-2227 lephone Number
Enclosed is a check for	the following amount r	nade payable to the Florida Depar	tment 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		Street Address Amendment Section	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Articles of Amendment

Articles of Incorporation

of

•	
	CREDIT IN DEMAND, INC
	(Name of Corporation as currently filed with the Florida Dept. of State)
	P09000049264
	(Document Number of Corporation (if known)
	•

(Document Number of Corpora		
Pursuant to the provisions of section 607.1006, Florida Statu amendment(s) to its Articles of Incorporation:	ites, this Florida Profit Corporation adopts the	he follo
A. If amending name, enter the new name of the corporation	<u>on:</u>	
		e new
name must be distinguishable and contain the word "corpabbreviation" (Corp.," "Inc.," or Co.," or the designation (Contain the word "chartered," "professional associations and the word "chartered," "professional associations are must contain the word "chartered," "professional associations are must contain the word "chartered," "professional associations are must be distinguishable and contain the word "corp."	Corp," "Inc," or "Co". A professional corpo	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	2222 PONCE DE LEON BLVD	
(Principal office address MOST BE A STREET ADDRESS)	PENTHOUSE	
	CORAL GABLES, FL 33134	.
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ECKET AHA	
	38.5 78.4 78.5	ě
	<u> </u>	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	e address in Florida, enter the name of the &	<u>၁</u>
Name of New Registered Agent: RENELIO M	ARTINEZ	
· · · · · · · · · · · · · · · · · · ·	E DE LEON BLVD rida street address)	
CORAL GAB	• 1 • • •	
(City,		_
New Registered Agent's Signature, if changing Registered & I hereby accept the appointment as registered agent. I am fam.		sition.
- C		

Signature of New Registered Agent, if changing

it amending the Utilicers anglor 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
Р	RENELIO MARTINEZ	2222 PONCE DE LEON BLVD PENTHOUSE CORAL GABLES, FL 33134	☐ Add ☐ Remove
<u>P</u>	BARBARA IGLESIAS	2222 PONCE DE LEON BLVD PENTHOUSE CORAL GABLES, FL 33134	☐ Add ☐ Remove
			Add Remove
	g or adding additional Articles, enter c tional sheets, if necessary). (Be specific		
		,	
provisions	ndment provides for an exchange, reclassion implementing the amendment if neapplicable, indicate N/A)		
100% OF SH	HARES TO RENELIO MARTINEZ		
		1	

the date of each an indment	(s) adoption: 06/01/2010	
y	(s) adoption: 06/01/2010 (date of adoption is required))
Effective date if applicable:	(no more than 90 days after amendment file dat	(e)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	:
The amendment(s) was/wei by the shareholders was/we	re adopted by the shareholders. The number of vere sufficient for approval.	votes cast for the amendment(s)
	re approved by the shareholders through voting g d for each voting group entitled to vote separatel	
"The number of votes	cast for the amendment(s) was/were sufficient fo	or approval
by	23	
	(voting group)	• • • • • • • • • • • • • • • • • • •
action was not required.	re adopted by the board of directors without share re adopted by the incorporators without sharehold	·
		1
Dated	70-4-Mildrend	
Signature		<u>. </u>
scle	a director, president or other officer – if director cted, by an incorporator – if in the hands of a recointed fiduciary by that fiduciary)	
	BARBARA IGLESIAS	
	(Typed or printed name of person s	signing)
	OLD PRESIDENT	
•	(Title of person signing)	•