P09000090118

| (Re | questor's Name) | . |
|-------------------------|--------------------|--------------|
| (Ad | dress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nai | me) |
| (Do | ocument Number) |) |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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And the same was the Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPORA | ATION: MUNICIPA | L CREDIT SER | VICE CORP | |
|--|---|---|--|--|
| DOCUMENT NUMBI | ER: P0900009011 | 8 | | |
| | f Amendment and fee are su | | | |
| Please return all corresp | ondence concerning this mat | tter to the following: | | |
| ı | MARIBEL LOPEZ | <u>7</u> | | |
| - | | Name of Contact Persor | 1 | |
| ľ | MUNICIPAL CREDIT SERVICE CORP | | | |
| _ | | Firm/ Company | | |
| 8 | 8672 BIRD ROAD STE 208 | | | |
| _ | | Address | | |
| ſ | MIAMI FL 33155 | | | |
| _ | | City/ State and Zip Code | e | |
| INF | O@MIAMI12345. | .COM | | |
| | | sed for future annual report | notification) | |
| For further information | concerning this matter, pleas | se call: | | |
| MARIBEL LO | PEZ | at (| 1 | |
| Name of Contact Person | | Area Co |)de & Daytime Telephone Number | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment 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 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 Circle Tallahassee, FL 32301 | | |

Articles of Amendment to Articles of Incorporation of



MUNICIPAL CREDIT SERVICE CORP

14 NOV 20 AM 9: 43

| (Name of Corporation as | currently filed with the Flor | rida Dept. of State) | |
|--|--|---|----------------------|
| P09000090118 | | | |
| (Documen | nt Number of Corporation (if k | nown) | |
| Pursuant to the provisions of section 607. its Articles of Incorporation: | 1006, Florida Statutes, this Flo | orida Profit Corporation adopts the follo | wing amendment(s) to |
| A. If amending name, enter the new na | me of the corporation: | | |
| name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa | ation "Corp," "Inc," or "Co | ". A professional corporation name m | |
| B. Enter new principal office address, (Principal office address MUST BE A ST | | | |
| | | | - |
| C. Enter new mailing address, if appli (Mailing address MAY BE A POST C | | | |
| | | | |
| D. If amending the registered agent an new registered agent and/or the new | d/or registered office addres v registered office address: | s in Florida, enter the name of the | |
| Name of New Registered Agent | MARIBEL LOPEZ | , | |
| in the state of the transfer o | 8672 BIRD ROAL | O STE 208 | |
| | (Florida street | · | |
| New Registered Office Address: | MIAMI | , Florida 33155 | |
| | (City) | (Zip Code) |) |
| New Registered Agent's Signature, if ch I hereby accept the appointment as registed | nanging Registered Agent: ered agent. I am familiar with grature of New Registered Age | | on. |

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 | <u>PT</u> | John Doe | | |
|----------------------------|--------------|---------------|-----------------|--|
| X Remove | <u>v</u> | Mike Jones | | |
| X Add | <u>sv</u> | Sally Smith | | |
| Type of Action (Check One) | <u>Title</u> | <u>Name</u> | <u>Addres</u> s | |
| 1) Change | Р | ROMELIA RONDA | 8672 BIRD ROAD | |
| Add | | | STE 208 | |
| Remove | | | MIAMI FL 33155 | |
| 2) Change | Р | MARIBEL LOPEZ | 8672 BIRD ROAD | |
| Add | | · — | SUITE 208 | |
| Remove | | | MIAMI FL 33155 | |
| 3) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | <u></u> | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| | icles, enter change(s) here: (Be specific) |
|---|--|
| (Attach additional sheets, if necessary). | (be specifie) |
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| nrovisions for implementing the ame | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | Manual II and Communication of the Communication of |
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| The date of each amendment(s) a | doption: 11/17/2014 | FIL SECRETAR) DIVISION DE C | EO OF STATE ORPORATIONS | , if other than the | |
|--|---|-----------------------------------|-------------------------------|---------------------|--|
| date this document was signed. | /17/2014 | 14 NOV 20 | AM 9:41 | | |
| | (no more than 90 days after amendment file date) | | | | |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | | | | |
| The amendment(s) was/were adby the shareholders was/were s | opted by the shareholders. The ufficient for approval. | number of votes cast | for the amendment(s) | | |
| | proved by the shareholders thro r each voting group entitled to v | | | | |
| "The number of votes cas | t for the amendment(s) was/were | sufficient for approv | val | • | |
| by | · (voting group) | | ·.'· | | |
| _ | (voting group) | | | | |
| The amendment(s) was/were ad action was not required. | opted by the board of directors | without shareholder a | ction and shareholder | | |
| The amendment(s) was/were ad action was not required. | opted by the incorporators with | out shareholder action | and shareholder | | |
| Dated_11/17/2 | 014 | | | | |
| Signature | ARFitest | | | | |
| (By a select | director, president or other officed, by an incorporator – if in the inted fiduciary by that fiduciary) | | | | |
| | ROMELIA RONDA | | | | |
| | (Typed or p | rinted name of persor | signing) | | |
| | PRESIDENT | | | | |
| | (Tit | le of person signing) | | | |