# P090000013559

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

Amenda

### **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

. Division of Corporations First Florida State Financial Inc NAME OF CORPORATION P09000093559 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: luis I Rodriguez Name of Contact Person First Florida State Financial Inc · Firm/ Company 2919 Coconut Ave #7 Address Coconut Grove, FI 33133 City/ State and Zip Code luis@firstfloridastatefinancial.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: 893-1000 luis I Rodriguez Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$52.50 Filing Fee ☐ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Mailing Address Street Address **Amendment Section** Amendment Section

**Division of Corporations** 

2661 Executive Center Circle

Clifton Building



### FLORIDA DEPARTMENT OF STATE Division of Corporations

July 7, 2010

LUIS I. RODRIGUEZ FIRST FLORIDA STATE FINANCIAL INC. 2919 COCONUT AVE #7 COCONUT GROVE, FL 33133

SUBJECT: FIRST FLORIDA STATE FINANCIAL INC.

Ref. Number: P09000093559

We have received your document for FIRST FLORIDA STATE 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 date of adoption of each amendment must be included in the document.

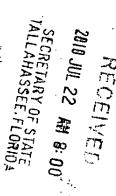
Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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: 910A00016487



## Articles of Amendment to Articles of Incorporation of

First Florida State Financial Inc
(Name of Corporation as currently filed with the Florida Dept. of State)



P09	9000093559			
(Document Nu	mber of Corporati	on (if known)	•	
Pursuant to the provisions of section 607.10 mendment(s) to its Articles of Incorporation:	06, Florida Statute	es, this <i>Florida Pr</i>	ofit Corporation	adopts the fol
A. If amending name, enter the new name	of the corporation	<u>ı:</u>		
		*		The nev
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or th name must contain the word "chartered," "pr	e designation "Co	orp," "Inc," or "Co	o". A professio	oorated" or th onal corporation
3. Enter new principal office address, if ap	plicable:		• • •	
Principal office address <u>MUST BE A STRE</u>	ET ADDRESS )			<del>*************************************</del>
	•			
		-		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF	<u>e:</u> ICF ROY)			
(maining addition in the control of	,			
· -	* 2	<u>, , , , , , , , , , , , , , , , , , , </u>	_ <del>;                                   </del>	<del></del>
			··	<del></del>
D. If amending the registered agent and/or	registered office	address in Florids	<u>, enter the nam</u>	e of the
new registered agent and/or the new reg	istered office add	iress:		
Name of New Registered Agent:				
	7333 Coral w	av Ste F		
New Registered Office Address:	(Florida street address)			
	Miam		Florida	33155
	(City)		(Zip Code)	
lew Registered Agent's Signature, if chang hereby accept the appointment as registered			t the obligations	of the position.
	Signature of New	Registered Agent, i	f 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)

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VP	Cynthia D	)avide		7333 Coral way	Ste F	<u>:</u> 🖸 /	
				Miami, Florida	3155	D I	Remove
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. If amend	ing or adding	<u>additional Arti</u>	<u>cles, enter c</u>	hange(s) here:		<u>.</u> .	
(attach ad	ditional sheets,	if necessary).	(Be specific	<i>)</i>			•
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*	The date of each amendment(s) adoption:			
**	The date of each amendment(s) adoption: (date of adoption is required)			
	Effective date if applicable: 7///o			
	(no more than 90 days after amendment file date)			
<u> </u>	Adoption of Amendment(s) (CHECK ONE)			
, <del>T</del>	The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	)		
• <u>•                                   </u>	The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt		
	"The number of votes cast for the amendment(s) was/were sufficient for approval			
į.				
	by"  (voting group)			•
<u>.</u> "	(voting group)			:
- LAL - M	The amendment(s) was/were adopted by the board of directors without shareholder action and shareholde action was not required.	r g	414	-
	The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder			
	Dated 7 1 2010			
~	Signature (By a director; president or other difficer – 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)		••	
	The state of the s			
	luis I Rodriguez			
-	(Typed or printed name of person signing)			
'				
	President President			
	(Title of person signing)			
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