## P11000094074

| (Re                                     | equestor's Name)   |           |  |  |  |
|---|--------------------|-----------|--|--|--|
| (Ac                                     | ldress)            |           |  |  |  |
| (Ac                                     | ldress)            |           |  |  |  |
| (City/State/Zip/Phone #)                |                    |           |  |  |  |
| PICK-UP                                 | WAIT               | MAIL      |  |  |  |
| (Ви                                     | ısiness Entity Nan | ne)       |  |  |  |
| (Document Number)                       |                    |           |  |  |  |
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SEGRETARY OF STATE JIVISION OF CORPORATION

Sep. Lewis



## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

August 25, 2016

RAQUEL JEREZ / ADVANCE LENDER SERVICES CORP 8341 FOXWORTH CIR ORLANDO, FL 32819 US

SUBJECT: ADVANCE LENDER SERVICES, CORP Ref. Number: P11000094074

We have received your document for ADVANCE LENDER SERVICES, CORP and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6050.

Letter Number: 016A00018150

Carolyn Lewis Regulatory Specialist II

www.sunbiz.org

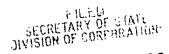
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPORATION: Advance Lender Services, Corp   |   |   |  |  |  |  |
|--|---|---|--|--|--|--|
| DOCUMENT NUMI  | BER: P11000094074                           |   |  |  |  |  |
|  | of Amendment and fee are su                 | bmitted for filing.   |  |  |  |  |
| Please return all corre  | spondence concerning this mat               | tter to the following:  |  |  |  |  |
|  | Raquel Jerez                                |   |  |  |  |  |
|  |   | Name of Contact Person  |  |  |  |  |
|  | Advance Lender Services, Co                 | orp   |  |  |  |  |
|  |   | Firm/ Company   |  |  |  |  |
|  | 8341 Foxworth Cir                           |   |  |  |  |  |
|  |   | Address   |  |  |  |  |
|  | Orlando, FL 32819                           |   |  |  |  |  |
|  |   | City/ State and Zip Code  | •  |  |  |  |
| xlaute   | osale@gmail.com                             |   |  |  |  |  |
|  |   | ed for future annual report   | notification)  |  |  |  |
|  |   |   |  |  |  |  |
| For further information  | n concerning this matter, pleas             | e call:   |  |  |  |  |
| Raquel Jerez   |   | at (  | 972-5015   |  |  |  |
| Name o   | of Contact Person                           | at (Area Coo  | de & Daytime Telephone Number  |  |  |  |
| _  |   |   | ·  |  |  |  |
| Enclosed is a check for the following amount made payable to the Florida Department 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 |  |  |  |  |

Taflahassee, FL 32301

## Articles of Amendment Articles of Incorporation



(Name of Corporation as currently filed with the Florida Dept. of State) AUG 22 PM 2: 32 P11000094074 (Document Number of Corporation (if known) 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: N/A 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: N/A (Mailing address MAY BE A POST OFFICE BOX)

New Registered Agent's Signature, if changing Registered Agent:

new registered agent and/or the new registered office address:

Name of New Registered Agent

New Registered Office Address:

ADVANCE LENDER SERVICES, CORP

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

D. If amending the registered agent and/or registered office address in Florida, enter the name of the

Signature of New Registered Agent; if changing

(Florida street address)

(City)

Florida

(Zip Code)

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 <math>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                  | T            | LUIS A. FÉRMIN FLORES | 6043 BAMBOO DR                            |  |  |
| X Add                      |              |                       | ORLANDO, FL 32807                         |  |  |
| Remove                     |              |                       |   |  |  |
| 2) Change                  |              |                       |   |  |  |
| Add                        |              |                       |   |  |  |
| Remove                     |              |                       |   |  |  |
| 3)Change                   | <del> </del> |                       |   |  |  |
| Add                        |              |                       | 1.3.4600000000000000000000000000000000000 |  |  |
| Remove                     |              |                       |   |  |  |
| 4) Change                  |              |                       |   |  |  |
| Add                        |              |                       |   |  |  |
| Remove                     |              |                       |   |  |  |
| 5) Change                  |              |                       |   |  |  |
| Add                        |              |                       |   |  |  |
| Remove                     |              |                       |   |  |  |
|                            |              |                       |   |  |  |
| 6) Change                  |              |                       |   |  |  |
| Add                        |              |                       |   |  |  |
| Remove                     |              |                       |   |  |  |

| Augul aac           | ditional sheet                        | ts, if necessary                       | y). (Be spec | change(s) her<br>ific) | <del>_</del>   |                 |             |  |
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| f an amer           | ndment prov                           | <u>ides for an e</u>                   | change, recl | assification, o        | r cancellation | of issued share | <u>S</u>    |  |
| provision<br>(if no | <u>is for implen</u><br>ot applicable | nenting the an indicate N/A)           | mendment if  | not contained          | in the amenda  | nent itself:    |             |  |
| (9 110              | ч иррисиот,                           | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |              |                        |                |                 |             |  |
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|                     |                                       |  |              |                        |                |                 |             |  |

| The date of each amendment(s) ad   | option:  | r (Litable if other than the                     |
|--|--|--|
| date this document was signed.   |  | SECRETARY OF STRATES.  JIVISION OF CORPORATION   |
| Effective date if applicable:  |  | 22 PH 2: 32                                      |
|  | (no more than 90 days after amendm   | em file da 2016 AUG 22 PM 2: 32                  |
| Note: If the date inserted in this b document's effective date on the De | lock does not meet the applicable statutory filing partment of State's records.  | requirements, this date will not be listed as th |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )   |  |
| ☐ The amendment(s) was/were ado by the shareholders was/were sur         | pted by the shareholders. The number of votes cas ficient for approval.  | st for the amendment(s)                          |
|  | roved by the shareholders through voting groups. each voting group entitled to vote separately on the  |  |
| "The number of votes cast  | for the amendment(s) was/were sufficient for appro   | oval   |
| by   |  |  |
| •  | (voting group)   |  |
| ☐ The amendment(s) was/were ado action was not required.                 | pted by the board of directors without shareholder   | action and shareholder                           |
| The amendment(s) was/were ado action was not required.                   | pted by the incorporators without shareholder action   | on and shareholder                               |
| 8/8/2016   |  |  |
| Dated  | RED. —   |  |
| selected   | rector, president or other price; – if directors or o<br>l, by an incorporator – if in the hands of a receiver,<br>ed fiduciary by that fiduciary) |  |
|  | RAQUEL JEREZ   |  |
| •  | (Typed or printed name of person signi   | ng)  |
|  | PRESIDENT  |  |
| •  | (Title of person signing)  |  |