P11000108400

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SECRETARY OF STATE

AM 7: 35

SEP 2 3 2021 S. PRATHER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR.	ATION: InterIsland Mortgag	ge Corporation	
DOCUMENT NUMB			
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
3	Maureen D. McInerney		
	and and allowed belong a constructions.	Name of Contact Person	n
1 -	nterIsland Mortgage Corpora		
		Firm/ Company	
<u>-</u>	1704 18th Avenue West		
		Address	
<u> </u>	Bradenton, FL 34209		
-		City/ State and Zip Cod	e
ŀ	cim@iimegroup.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information Maureen D. McInerney	concerning this matter, pleas	se call: at (³⁰³	523-7730
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	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 Fiting Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassec, FL 32314	Ameno Divisio The C 2415 I	Address Iment Section on of Corporations Jentre of Tallahassee N. Monroe Street, Suite 810 assee, Fl. 32303

Articles of Amendment to Articles of Incorporation of

InterIsland Mortgage Corporation

(Name of Cor	poration as curren	tly filed with the Florida Dep	t. of State)
P11000108400			\$621 \$44.5
(Document Number	of Corporation (if known)	SEP SEP
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this	s Florida Profit Corporation a	dopts the following frendemnt(s)
A. If amending name, enter the new name of	the corporation:		100 718 718 718
NIA			3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
name must be distinguishable and contain the wa "Inc" or Co.," or the designation "Corp," "chartered," "professional association," or the B. Enter new principal office address, if app	"Inc," or "Co". cabbreviation "P.A.	A professional corporation i	or the abbreviation "Corp.," name must contain the word
(Principal office address MUST BE A STREE			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE) D. If amending the registered agent and/or the second second and/or the second	CE BOX) registered office ad-		ime of the
new registered agent and/or the new regi	stered office addres	<u>ss:</u>	
Name of New Registered Agent	NA.		
			
	(Florida s	treet address)	
New Registered Office Address:		(City)	Florida (Zip Code)
		15.00	104/ (104)
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a			ns of the position.
	A	Registered Agent, if changing	
	Signature of New	Registered Agent, if changing	
Chack if applicable			

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Do	<u>oc</u>		
X Remove	<u>V</u>	Mike Jo	<u>nes</u>		
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	Title		Name	<u>Addres</u> s	
1) Change	V		Antony R. Migliavacca	708 Dorsey Way	
X Add				Louisville, KY 40223	
Remove					
2) Change		·· ···			
Add					
Remove 3) Change					
Add					
Remove					
4) Change		_			
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

Attach additional	dding additional Ar l sheets, if necessary).	. (Be specific)	e(s) nere.		
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	- · · ·				
	t provides for an exemplementing the an				
(if not appli	icable, indicate N/A)				
<u> </u>	NE	•			
		•			
					

The date of each amondments	September 1, 2021	, if other than the
The date of each amendment(s date this document was signed.) adoption:	, if other than the
_	September 1, 2021	
Enective date it apprease.	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date we Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action at	nd shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) to sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
	east for the amendment(s) was/were sufficient for approval	. £ gg 28
by	(voting group)	21 S
	(voting group)	FILI 2021 SEP O SEGRE ARY NLLAHA#SE
Septem Dated	ber 1, 2021	ILED IO AH SEE, FL
Signature	namen In Drawey	7: 35
sele	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	<u></u> Σ
	Maureen D. Melnerney	
	(Typed or printed name of person signing)	
	Vice President & Chief Legal Officer	
	(Title of person signing)	