P12000100973

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MORTGAGE HO	LDING AND INVESTME	NT, INC.
DOCUMENT NUM			
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Judy Karniewicz, Esq.		
		Name of Contact Person	1
	The Karniewicz Law Group		
		Firm/ Company	
	1211 W Fleicher Ave		
		Address	
	Tampa, FL 33612		
		City/ State and Zip Cod	-
	liza@tklg.net		
	-	sed for future annual report	notification)
For further information	on concerning this matter, pleas		962-0747
Name	of Contact Person	Area Co) 962-0747 de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Check if applicable

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

Articles of Amendment Articles of Incorporation

of

FILED

(<u>Name c</u>	of Corporation as current	ly filed with the Florida D	क्ष्मविश्विष्टि <mark>क्तरः – </mark> ।	PH 3: 59
P12000100973				
	(Document Number of	of Corporation (if known)	TALLAHA:	-UM STATE - SSEE, FL
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	adopts the followi	ing amendment(s)
A. If amending name, enter the new na	ame of the corporation:			
				The new
name must be distinguishable and contain "Inc.," or Co," or the designation "C "chartered," "professional association,"	lorp," "Inc," or "Co".	A professional corporation		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		77522 Overseas Highw	ay	
		Islamorada, FL 33036		
			-	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		PO Box 86		
		Islamorada, FL 33036		
N. If an additionable and according to	diamental office and	luose in Elevido autor tha	rama of the	
 If amending the registered agent an new registered agent and/or the new 			iame or the	
Name of New Registered Agent	Michael A. Reckwerdt	99E		
	77522 Overseas Highway			
	(Florida st	reet address)		
None Registered Office Address	Islamorada		Florida 33036	
New Registered Office Madress.		(City)		Code)
New Registered Office Address:	Islamorada	(City)	Florida	Code)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	hanging Registered Agent ered agent. I am familiar	t: with and accept the obligati	ions of the position.	
	Signed by:	e bwerdt		
		POWER - CON		

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)

Example:

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.

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	CEO	James Richards	77420 Overseas Highway
Add			Islamorada, FL 33036
Remove 2) Change	CEO	Michael A. Reckwerdt	PO Box 86
XAdd			Islamorada, FL 33036
Remove 3) Change	<u>P</u>	Robert A. Reckwerdt	PO Box 86 Islamorada, FL 33036
X Add Remove 4) Change X Add	V	Anna A. Reckwerdt	PO Box 86 Islamorada, FL 33036
Remove 5) Change Add			
Remove 6) Change Add Remove			

Mac	ending or adding additional Articles, enter change(s) here: h additional sheets, if necessary). (Be specific)	
		· · · · · · · · · · · · · · · · · · ·
fan	amendment provides for an exchange reclassification or cano	rellation of issued shares.
pro	amendment provides for an exchange, reclassification, or cancisions for implementing the amendment if not contained in the	amendment itself:
	(if not applicable, indicate N/A)	
		·
		
		

Docusign Envelope ID: 9262B8C3-2E87-42C0-82D1-C2D76C1B26DE date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. Adoption of Amendment(s) (CHECK ONE) ■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required. ☐ 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. ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s): "The number of votes cast for the amendment(s) was/were sufficient for approval (voling group) 11/27/2024 Dated_ Anna A. Rickwirdt Signature (By a directors of officer of other officer - 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)

Anna A, Reckwerdt

(Typed or printed name of person signing)

Vice President

(Title of person signing)