P1300017855

(Requ	estor's Name)	
(Addre	ess)	
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Certified Copies	Certificates of Status	
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05/24/23--01006--028 **35.00

07/19/2023 S.C

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: STEWART CAPI	TAL LENDING, INC				
DOCUMENT NUMB						
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all corres	pondence concerning this ma	tter to the following:				
	GLEN A JACKSON					
	Name of Contact Person					
	STEWART CAPITAL LENDING, INC					
•		Firm/ Company				
	1101 MIRANDA LANE SUI	TE 131				
•	Address					
	KISSIMMEE FLORIDA 34741					
		City/ State and Zip Code				
	STEWARTCAPITALUSA@	GMAIL.COM				
	E-mail address: (to be us	ed for future annual report	notification)			
For further information	concerning this matter, pleas	e call:				
GLEN A JACKSON		at (321	805-2035			
Name o	f 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	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Ame Dívi: P.O.	ing Address ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Divisio The Co 2415 N	Address Iment Section In of Corporations In of Tallahassee I. Monroe Street, Suite 810 Issee, FL 32303			

Articles of Amendment to Articles of Incorporation of

STEWART CAPITAL LENDING, INC

(Name of Corporation as curr	ently filed with the Florida Dept. of State)	
P13000017855		
(Document Numb	er of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, tits Articles of Incorporation:	this Florida Profit Corporation adopts the follo	owing amendment(s
A. If amending name, enter the new name of the corporation	<u>:</u>	
		The new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P	'. A professional corporation name must co	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		
C. Enter new mailing address, if applicable:	PO BOX 770455	23
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		
	ORLANDO FLORIDA 32877	N .
		>- · · · ·
		2.
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office add		= 12. = =
		○ ··
Name of New Registered Agent		
	a street address)	
(F1071th	a street aaaress)	
New Registered Office Address:	(City), Florida	Zip Code)
	(Cigy	zip Coue)
New Registered Agent's Signature, if changing Registered Ag	ent:	
hereby accept the appointment as registered agent. I am famili	iar with and accept the obligations of the positi	on.
Signature of Ne	w Registered Agent, if changing	
,	····	
Check if applicable		

 \Box 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)

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.

<u>v</u>	Mike Jones	
<u>SV</u>	Sally Smith	
<u>Title</u>	<u>Name</u>	<u>Addres</u> s
<u>v</u>	SHANTI S STEWART	PO BOX 770455
		ORLANDO FL 32877
		· · · · · · · · · · · · · · · · · ·
	<u>SV</u> <u>Title</u>	SV Sally Smith Title Name

	(Be specific)
	
	
,	
f an amendment provides for an exc	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
f an amendment provides for an exc provisions for implementing the am (if not applicable, indicate N/A)	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the amo	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the amo	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

MAY 20, 2023	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
JUNE 01, 2023 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 document's effective date on the Department of State's records.	ate will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	ion and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statem must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
Dated	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other cou appointed fiduciary by that fiduciary)	
GLEN A JACKSON	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	