## P13000042587

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13 SEP 18 PM 1:29
SECREDARY OF STATE

C. LEWIS SEP 2 5 2013 EXAMINER

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: M	eridian Fi	nancial Corpora	tion	
	0004258	7		
The enclosed Articles of Amendmen	and fee are sul	omitted for filing.		
Please return all correspondence con-	cerning this mat	ter to the following:		
O Cesar				
		Name of Contact Person	l .	
Meridiar	ı Financia	d Corporation		
<del> </del>		Firm/ Company		
110 Eas	t Broward	l Blvd. #1700		
		Address		
Ft Laude	erdale FI	33301		
		City/ State and Zip Code	•	
busine E-mail ac	SS <u>Con</u> Idress: (to be us	Sultanta ed for future annual report	DQO / COM	
For further information concerning the	is matter, pleas	e call:		
O Cesar		at (954	, 323-9100	
Name of Contact Pers	on	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following	amount made p	nayable to the Florida Depa	rtment of State:	
	Filing Fee & ate 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		Amend	Address ment Section n of Corporations	
P.O. Box 6327		Clifton Building		
Tallahassee, FL 32314		2661 Executive Center Circle Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

FILED

Meridian Financial	Corporation
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13 SEP 18 PH 1: 28

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE P13000042587 TALLAHASSEE, FLORIDA (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: 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: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: O Cesar Name of New Registered Agent 110 East Broward Blvd # 1700 (Florida street address) Ft Lauderdale New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agont. am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if 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)

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> J	John Doe				
X Remove	Y M	Mike Jones				
X Add	<u>sv</u> s	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change	<u>P</u>	Cesar, Osv	110 East Broward Blvd. #1700			
X			Ft Lauderdale Fl 33301			
Remove			44-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-1-4-			
2) Change	P	CESAR, VIVIAN	5111 NW 57 way			
Add			Coral Springs, FI 33067			
X Remove			About an experience of the finisher to the first of the f			
3) Change		<del></del>	····			
Add						
Remove			***************************************			
4) Change						
Add						
Remove			<del>,</del>			
5) Change			·			
Add			Company of the compan			
Remove			***************************************			
6) Change						
Add						
Remove						

	If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
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The date of each amendment(s) add	option:	fother than the
date this document was signed.		
Effective date if applicable:		13 SEP 18 PM 1: 23
	(no more than 90 days after a	imendment file date SECRETARY OF STATE TALLAHASSEE, FLORIDA
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suff	nted by the shareholders. The number of varieties for approval.	otes cast for the amendment(s)
	oved by the shareholders through voting grach voting group entitled to vote separate	
"The number of votes cast for	or the amendment(s) was/were sufficient for	or approval
by	(voting group)	.,
	(1,0,11,9,9,1,0,1,1)	
The amendment(s) was/were adopt action was not required.	ted by the board of directors without share	eholder action and shareholder
The amendment(s) was/were adoptaction was not required.	ted by the incorporators without sharehold	der action and shareholder
Dated 09-03	-2013/	
Signature		
(By a dir selected	ector, president or other officer – if direct by an incorporator – if in the hands of a r d fiduciary by that fiduciary)	
(	Osv Cesar	
-	(Typed or printed name	of person signing)
_	President	
_	(Title of person	signing)