P13000082710

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

C. LEWIS

OCT 2 9 2013

EXAMINER

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: PILGRIM FINANCE CORP DOCUMENT NUMBER: P13000082710 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: NICHOLAS PUND Name of Contact Person Firm/ Company 2104 FRINGE TREE LN THE VILLAGES FL 32162 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407 Area Code & Daytime Telephone Number GAIL HEDGLIN Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee **□\$43.75** Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, PL 32314 2661 Executive Center Circle

MONG MAIN MULATIL CLAZ (67 1) 37

Tallahassec, FL 32301

APPROVED AND FILED

13 OCT 18 AHII: 26

Articles of Amendment to Articles of Incorporation of

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PILGRAM FINANCE CORP				
(Name of Corporation as currently filed with the Flo	rida Dept. of State)			
P13000082710				
(Document Number of Corporation (if I	(nown)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Fits Articles of Incorporation:	lorida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation:				
PILGRIM FINANCE CORP	The new			
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "F	" "company," or "incorporated" or the abbreviation o". A professional corporation name must contain the A.,"			
B. Enter new principal office address, if applicable:	2104 FRINGE TREE LN			
(Principal office address MUST BE A STREET ADDRESS)	THE VILLAGES FL 32162			
C. Enter new mailing address, if applicable:				
(Malling address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered office addre	in Florida antau the name of the			
new registered agent and/or the new registered office address:				
Name of New Registered Agent				
Traine of frem registered rights				
(Florida street address)				
,	· · · · · · · · · · · · · · · · · · ·			
New Registered Office Address: (City)	, Florida (Zip Code)			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.				
I not our weeps the appointment as registered agent. I am jumittar w	an and accept the oungations of the position.			
Signature of New Registered A	eent, if changing			

Page 1 of 4

. 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change		<u> </u>	
Add			
Remove			
•			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove		,	•

attach additional sheets, if necessary). (Be specific)	,
	·
	
	<u> </u>
	-
•	
an amendment provides for an exchange, reclassifi provisions for implementing the amendment if not c	ication, or cancellation of issued shares,
(if not applicable, indicate N/A)	Ontained in the amendment fisch.
	•
	,

APPROVED AND FILED

13 8CT 18 AM 11: 26

	SECRETARY OF STATE
The date of each amendment(s) add date this document was signed.	option:TALLAHASSEE FLORING then the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amondment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suf	sted by the shareholders. The number of votes east for the amendment(s) ficient for approval.
	oved by the sharcholders through voting groups The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast f	or the amendment(s) was/were sufficient for approval
by	(voting group)
· 	(voting group)
The amendment(s) was/were ado action was not required.	oted by the board of directors without shareholder action and shareholder
The amendment(s) was/were ado action was not required.	oted by the incorporators without shareholder action and shareholder
Dated	11,29-13
مسته ر Signature	1/1 chilan Ten
(By a di	region, president or other officer - If directors or officers have not been
	by an incorporator - if in the hands of a receiver, trustee, or other court
appoint	od fiduciary by that fiduciary)
	Nicholas fano
	(Typed or printed name of person signing)
	Pres
	(Title of person signing)