P140000002464

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Amendices

JAN 26 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: AMERICAN MOI	RTGAGE SERVICING SO	LUTIONS INCORPORATE
DOCUMENT NUM	P14000002664		
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	BARBARA PUCCI		
		Name of Contact Person	
	AMERICAN MORTGAGE SERVICING SOLUTIONS INCORPORATED		
	Firm/ Company		
	149 S RIDGEWOOD AVE STE 200		
		Address	
	DAYTONA BEACH, FL 32	2117	
		City/ State and Zip Code	;
BPU	ICCIAMS@GMAIL.COM		
	_	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call: at (386	_) <u>506-1892</u>
Name	of Contact Person	at (Area Coo) de & Daytime Telephone Number
	or the following amount made		
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate 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)
Am Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

AMERICAN MORTGAGE SERVICING SOLUTIONS INCORPORATED

(Name of Corporation as cur	rently filed with the Florida Dept.	of State)	
214000002664			
(Document Num	ber of Corporation (if known)		
ursuant to the provisions of section 607.1006, Florida Statutes s Articles of Incorporation:	, this <i>Florida Profit Corporation</i> add	opts the following amendme	:nt(s)
. If amending name, enter the new name of the corporatio	<u>n:</u>		
Not Applicable		The new	,
ame must be distinguishable and contain the word "corpo Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," ord "chartered," "professional association," or the abbrevia	or "Co". A professional corporal	rated" or the abbreviation	,
. Enter new principal office address, if applicable:	Not Applicable		
Principal office address <u>MUST BE A STREET ADDRESS</u>)			
		}	
		2	
Enter new mailing address, if applicable:	Not Applicable	,	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	···		THE PRINCIPAL PR
			l?
		3	
. If amending the registered agent and/or registered office	address in Florida, enter the nam	e of the	
new registered agent and/or the new registered office ad			
Not Applicable Not Applicable			
(Flori	ida street address)		
(Flori	,	Florida	

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.

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>	Name	Address
1) Change	V	MARK ROSENWASSER	6928 SUGARBUSH DR
XAdd			ORLANDO, FL 32819
Remove			
2) Change	<u>s</u>	KAYLA WILLIAMS	····
Add			
X Remove			-
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
lot Applicable	
· · · · · · · · · · · · · · · · · · ·	
. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
lot Applicable	

	08/22/2016	
The date of each amendment		_, if other than the
date this document was signed.	08/22/2016	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were by the shareholders was/we	e adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.	
	e approved by the shareholders through voting groups. The following statement d 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	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were action was not required.	e adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	e adopted by the incorporators without shareholder action and shareholder	
01/19/	2017	
Dated	Dammie Helfon	
(B)	y a director, president or other officer - if directors or officers have not been	 .
	lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
ар	pointed inductary by that inductary)	
	TAMMIE HELTON	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	