P1500008308

(Re	questor's Name)	
	J	
(Ad	dress)	
(A d	dress)	
(Au	uless)	
(Cit	y/State/Zip/Phone	: #)
(,,	,
—		
☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
<u></u>		
(Do	cument Number)	
Certified Copies	Cortificator	of Status
Certified Copies	_ Certificates	or status
Special Instructions to	Filing Officer:	
1		

Office Use Only



500271313875

04/06/15--01015--006 **35.00

SECRETARY OF STATE OF CORPORATIONS

Anund Jay 27, 15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: The Opm Sub	stitute Resolution Co	ouncii inc		
DOCUMENT NUN	ивек: P15000008308				
The enclosed Article	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	Malcolm Stimphil				
		Name of Contact Perso	n		
	The Opm Substitute Resolution Council Inc				
	Firm/ Company				
	4776 via bari apt 6207	,			
	Address				
	Lake Worth fl 33463				
		City/ State and Zip Cod	е		
орі	mcouncil@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)	_	
For further informati	ion concerning this matter, pleas	se call:			
Malcolm Stimphil		954	8682253		
Nam	Name of Contact Person Area Code & Daytime Telephone		de & Daytime Telephone N	Jumber	
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	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	TAL TALS	
Mailing Address		Street Address		# 25 m	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

15 APR 24 PH 1: 06



April 8, 2015

MALCOLM STIMPHIL THE OPM SUBSTITUTE RESOLUTION COUNCIL 4776 VIA BARI - APT. 6207 LAKE WORTH, FL 33463

SUBJECT: THE OPM SUBSTITUTE RESOLUTION COUNCIL INC

Ref. Number: P15000008308

We have received your document for THE OPM SUBSTITUTE RESOLUTION COUNCIL INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must have original signatures.

If the corporation is a **PROFIT** corporation it must be signed 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 court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

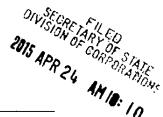
Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 715A00006968

Articles of Amendment to Articles of Incorporation of



The Opm Substitute Resolution Council Inc	lorida Dent. of State)
(Name of Corporation as currently filed with the F	lorida Dept. of State)
P15000008308	
(Document Number of Corporation (if	f known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
The Opm Council inc	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "word "chartered," "professional association," or the abbreviation "	n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	<u> 4 Ú</u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4595 hypoluxo rd. suite 4 #7
	lake worth fl 33463
D. If amending the registered agent and/or registered office address: Name of New Registered Agent Name of New Registered Agent	
Name of New Registered Agent	
(Florida str	eet address)
New Registered Office Address:	. Florida
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	
Signature of New Registered A	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.

X Change	<u>PT</u> Jol	nn Doe		
X Remove	<u>V</u> <u>Mi</u>	Mike Jones		
X Add	<u>SV</u> <u>Sal</u>	lly Smith		
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) Change	CEO	Malcolm Stimphil	4776 via bari apt 6207	
✓ Add			Lake Worth FI 33463	
Remove				
2) Change	VP	Myrcedez Charpentier	13050 40th In N	
Add			Royal palm beach FL 33411	
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

 If amending or ad (Attach additional s 	heets, if necessary).	(Be specific)	<u>(e(s) here</u> :		
	N	A			
		·			
			· .		
			· · · · · · · · · · · · · · · · · · ·		
				·	
-	***************************************	· · · · · · · · · · · · · · · · · · ·			
	·····				
·····					
					·
provisions for im	provides for an exch plementing the ame	ange, reclassifice	ation, or cancellantained in the an	ation of issued share nendment itself:	es.
(if not applica	ble, indicate N/A)				
	N A	<u> </u>	The state of the s		
		 			
		· · · · · · · · · · · · · · · · · · ·			
					
			· · · · · · · · · · · · · · · · · · ·		

- NIA	
The date of each amendment(s) adoption: IV PT	, if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
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	
by	•
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated March 30, 2015	
Signature Malcolm Stimphil	
(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 court appointed fiduciary by that fiduciary)	_
Malcolm Stimphil	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	_