P1500000 9254

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(Re	questor's Name)		
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(Ad	dress)		-
(Cit	y/State/Zip/Phone	· #)	
PICK-UP	MAIT	MAIL	
(Bu	siness Entity Nam	ne)	
(Do	cument Number)		-
Certified Copies	Certificates	of Status	-
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Special Instructions to	Filing Officer:		
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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: Milo Commercial I	Lending, Inc.	
	BER: P15000009254		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Joseph A Milo		
		Name of Contact Person	1
	Milo Commercial Lending, In	ac.	
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	2888 Oakland Park Blvd		
		Address	<u> </u>
	fort Lauderdale, FL 33306		
		City/ State and Zip Code	0
	mortgexp@comcast.ent		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Joseph A. Milo		954 at (940-2710
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check f	or 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)
An Div P.C	niling Address nendment Section vision of Corporations D. Box 6327 Ilahassee, FL 32314	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

Milo Commercial Lending, Inc.		
(Name of Corporation as curren	tly filed with the Florida Dept. of Stat	<u>e</u>)
P15000009254		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the new name of the corporation:		
Milo Lending, Inc.		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. B. Enter new principal office address, if applicable:	A professional corporation name mus	
(Principal office address <u>MUST BE A STREET ADDRESS</u>) C. <u>Enter new mailing address, if applicable:</u>	P.O. Box 880231	14 AH 8: 05
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	Port St. Lucie, FL 34988	
		
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address		:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Florida strect address)

(City)

Check if applicable

☐ 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)

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
I) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
δ) Change			·
Add			
Remove			

If any dimensional discount Addition to Additional Addi	• •
If amending or adding additional Articles, enter change(s) here:	
Attach additional sheets, if necessary). (Be specific)	
	<u> </u>
_	
	<u> </u>
•	
f an amendment provides for an exchange, reclassification, or cancellation of issued s	<u>hares,</u>
provisions for implementing the amendment if not contained in the amendment itself	<u>[:</u>
(if not applicable, indicate N/A)	
	

•

	on:	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :		J Cl. J
	tno more than 90 days after amen	ament file dater
Note: If the date inserted in this block document's effective date on the Departm		ing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors	without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	by the shareholders. The number of votes ant for approval.	east for the amendment(s)
☐ The amendment(s) was/were approved must be separately provided for each	d by the shareholders through voting group voting group entitled to vote separately of	os. The following statement or the amendment(s):
	ne amendment(s) was/were sufficient for a	
by	(voting group)	<u> </u>
2-13-2020 Detect		
Dated		
Signature		<u> </u>
(By a directon selected, by	or, president or other officer – if directors of an incorporator – if in the hands of a recei- duciary by that fiduciary)	
Jose	h Λ Milo	
Pres	(Typed or printed name of person sident	igning)
	(Taile of person signing)	_ :