

P15D000062881

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

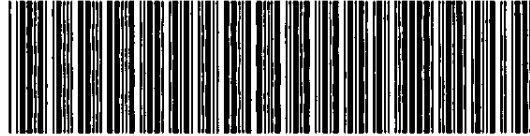
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800281062298

01/19/16--01001--023 \*\*35.00

FILED

2016 FEB -3 PM 1:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend*

FEB 04 2016  
I ALBRITTON

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: AMERICA MORTGAGE CORPORATION  
DOCUMENT NUMBER: P15000062881

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MUSTAPHA ABBA GANA

Name of Contact Person

AMERICA MORTGAGE CORPORATION

Firm/ Company

101 N RIVERSIDE DR STE 115E

Address

POMPANO BEACH FL 33062

City/ State and Zip Code

INFO @ AMERMORTCORP.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MUSTAPHA ABBA GANA

Name of Contact Person

at (

954

960 5225

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |   |  |   |  |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy<br>is enclosed) |
|---|--|---|--|

Mailing Address

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

Street Address

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



RECEIVED

16 FEB -4 AM 10: 33

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 20, 2016

MUSTAPHA ABBA GANA  
AMERICA MORTGAGE CORPORATION  
101 N. RIVERSIDE DR., STE. 115E  
POMPANO BEACH, FL 33062

SUBJECT: AMERICA MORTGAGE CORPORATION  
Ref. Number: P15000062881

We have received your document for AMERICA MORTGAGE CORPORATION 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 document must have original signatures.

You failed to sign the form.

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: 316A00001291

Articles of Amendment  
to  
Articles of Incorporation  
of

AMERICA MORTGAGE CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P15000062881

(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:**

*The new 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:**

Name of New Registered Agent MUSTAFA ABBA GANA  
101 N RIVERSIDE DR STE 115 E  
(Florida street address)  
New Registered Office Address: POMPANO BEACH, Florida 33062  
(City) (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.

  
Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

*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.*

|                 |           |                   |
|-----------------|-----------|-------------------|
| <u>X</u> Change | <u>PT</u> | <u>John Doe</u>   |
| <u>X</u> Remove | <u>V</u>  | <u>Mike Jones</u> |
| X Add           | SV        | Sally Smith       |

Title

Name

Address

1)          Change

Add

Remove

2) \_\_\_\_\_ Change

Add

Remove

3) Change

Add

Remove

4)      Change

Add

Remove

5) \_\_\_\_\_ Change

Add

Remove

6) \_\_\_\_\_ Change

Add

Remove

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

[illegible]

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: \_\_\_\_\_, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**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 11/13/16

Signature

(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)

MUSTAFA ABBA GANA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)