

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	ocument Number)	
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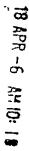


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R. WHITE APR 09 2018



## **COVER LETTER**

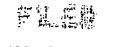
TO: Amendment Section **Division of Corporations** 

NAME OF CORPORAT	=	REDIT FOR YOU INC	
NAME OF CORPORAT  DOCUMENT NUMBER	P1800002	0586	
The enclosed Articles of A	mendment and fee are su	bmitted for filing.	
Please return all correspon	dence concerning this ma	tter to the following:	
	LIN CHEN		
_	REPAIR CREDI	Name of Contact Person T FOR YOU	n
<del></del>	1680 NE 125 ST	Firm/ Company	
<del></del>	NORTH MIAMI	Address FLORIDA 33181	
		City/ State and Zip Cod	e
	CLIN44@YAHO	O.COM	
	E-mail address: (	to be used for future annua	l report notification)
For further information con	ncerning this matter, pleas	se call:	
LIN CHEN		305 at (	746 308 <del>6</del>
Name of C	ontact Person		de & Daytime Telephone Number
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)
Amendn	Address nent Section of Corporations	Ameno	Address  Iment Section on of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## **Articles of Amendment Articles of Incorporation** of



18 APR -6 AM 10: 18

## REPAIR CREDIT FOR YOU INC

REPAIR CREDIT FOR YOU INC	AND THE PROPERTY OF THE PERSON
(Name of Corporation as currently filed with the Flo P18000020586	orida Dept. of State)
(Document Number of Corporation (if	known)
rsuant to the provisions of section 607.1006, Florida Statutes, this corporation:	corporation adopts the following amendment(s) to its Artic
If amending name, enter the new name of the corporation: PLATINUM LOAN SOLUTIONS INC	The new
me must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp,," "Inc," or "Cord "chartered," "professional association," or the abbreviation "I	"," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the
	1680 NE 125 ST
Enter new principal office address, if applicable: rincipal office address <u>MUST BE A STREET ADDRESS</u> )	NORTH MIAMI FLORIDA 33181
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1680 NE 125 ST
(Manning and Coo MATE BEST TOOL OF THE BOX	NORTH MIAMI FLORIDA 33181
. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	
Name of New Registered Agent	
	· ·
(Florida str	reet address)
New Registered Office Address:	, Florida
(City)	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	rith and accept the obligations of the position.
Signature of New Registered A	gent, 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.

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			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
S) Change			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)				
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f an amendment provides for an exchaprovisions for implementing the amen	ange, reclassific	ation, or cancell	ation of issued s	hares,	
(if not applicable, indicate N/A)	idiaent ii not co	intainied in the ar	nenanjeni usen.	<u>.</u>	
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## **APRIL 3rd, 2018** The date of each amendment(s) adoption: \_\_ if other than the date this document was signed. MARCH 1st. 2018 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 ☐ 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. APRIL 2nd, 2018 Dated 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) LIN CHEN (Typed or printed name of person signing) **PRESIDENT** (Title of person signing)