Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : LEBRON ACCOUNTING SERVICES INC

Account Number : I20110000076 Phone : (813)877-8918 Fax Number : (813)514-2806

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN **GM CREDIT FINANCIAL INC**

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Se Division of Cor				
NAME OF CORPO	ORATION: GM CREDIT FIN	VANCIAL INC		
DOCUMENT NUM	DIGGOOGLOOGL			
The enclosed Article	es of Amendment and fee are s	ubmitted for filing.		
Please return all corr	respondence concerning this ma	atter to the following:		
	MILKA HASKINS			
		Name of Contact Perso	m	
	HASKINS & HERRERA			
		Firm/ Company		
	5116 N ARMENIA AVE			
		Address		
	TAMPA, FL 33603			
		City/ State and Zip Cod	С	
LEE	BRONACCOUNTING@YAH	00.СОМ		
	E-mail address: (to be u	sed for future annual report	notification)	
For further information	on concerning this matter, plea	se call:		
MILKA HASKINS		at (⁸¹³	877-8918	
Name	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check f	or the following amount made			
S35 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)	
Mailing Address		Street	Address	
Amendment Section		Amendment Section		
Division of Corporations		Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			Building	
141	14 JEJ 14		xecutive Center Circle ssee, FL 32301	
		(4) LEU (A	3300g F IJ JZ3U J	

Articles of Amendment to Articles of Incorporation of

GM CREDIT FINANCIAL INC			
(Name	of Corporation as current	ly filed with the Florida Dept. of State)	
P19000019871			
	(Document Number o	fCorporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the fo	llowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or "Co". A professional corporation name "P.A."	
B. Enter new principal office address,	if applicable:	N/A	
(Principal office address MUST BE A S			
			
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		N/A	Es.
			- 10 - 10 - 10 - 10
			-
D. If amending the registered agent as	nd/or registered office add	ress in Florida, enter the name of the	5
new registered agent and/or the ne	w registered office addres	5:	
Name of New Registered Agent	N/A		<u> الم</u>
			<u> </u>
	(Florida st	reet address)	
New Registered Office Address:	N/A , Florida		
wew negistered Office Address.		(City) (Zip Code)	
New Registered Agent's Signature, if a I hereby accept the appointment as regis		t: with and accept the obligations of the pos	iition.
	Signistura of Vanc.	Registered Agent, if changing	
	ingrammo of item	watered ratem, y chunging	

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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 Sully Smith, SV as an Add.

X Change	PT	John Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
_X Add	<u>SY</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	PD	LUIS A HERNANDEZ-REBOLLAR	1315 WINDSOR WAY
Add			TAMPA, FL 33619
Remove			
2) X Change	VD	ALFREDO ANGELES-PEREZ	1315 WINDSOR WAY
Add			TAMPA, FL 33619
Remove			
3) X Change	SD	BRIGIDO A PEREZ	1315 WINDSOR WAY
Add			TAMPA, FL 33619
Remove			
4) Change	N/A		N/A N/A
Add			2 0
Remove			
5) Change	N/A		N/A SD 40
Add			
Remove			
6) Change	N/A		N/A
Add			
Remove			

(Attach additional sheets, if necessary). (Re specific)		
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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:		လ်
(If not applicable, indicate N/A)	TATE ORIDA	0
N/A). }>	0
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the state of the s	MAY 2, 2019			
The date of each amendment(s) adoption: date this document was signed.	;	, if ot	her than	n the
	•			
Effective date if applicable:	· y			
	(no more than 90 days after amendment file date)		_	
Note: If the date inserted in this block do- document's effective date on the Departmen	es not meet the applicable statutory filing requirements, this date wit of State's records.	ill not be i	isted as	s the
Adoption of Amendment(s) (CHECK ONE)			
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient to	the shareholders. The number of votes cast for the amendment(s) for approval.			
☐ The amendment(s) was/were approved by must be separately provided for each voi	y the shareholders through voting groups. The following statement ting group entitled to vote separately on the amendment(s):			
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	==		
by	n	= 2:	9	
by	(voting group)	22	X	
		1 , ;,		: 1
LI The amendment(s) was/were adopted by a action was not required.	the board of directors without shareholder action and shareholder	TANK KANY	9	
The amendment(s) was/were adopted by a action was not required.	the incorporators without shareholder action and shareholder	OF STATE	至	
MAY 2, 2019	/	95	بو	
Dated	//	즘	£	
Signature \ \	ita /	3	_	
selected, by an in	resident of other officer - if directors or officers have not been neorporator - if in the hands of a receiver, trustee, or other court ary by that following)			
ALFREI	OO ANGELES-PEREZ			
	(Typed or printed name of person signing)		_	
DIRECT	OR			
	(Title of person signing)		_	
	,			