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(R	equestor's Name)				
(A	ddress)				
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(C	ity/State/Zip/Phone #	9)			
PICK-UP	☐ WAIT	MAIL			
(B	usiness Entity Name	)			
(D	ocument Number)				
Certified Copies	Certificates o	f Status			
Special Instructions to Filing Officer:					





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## COVER LETTER

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**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: EMPIRE FINANC	CIAL SOLUTIONS OF TH	HE PALM BEACHES INC
DOCUMENT NUMBER: P19000077147		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
MIGGIE GRAHAM		
	Name of Contact Person	1
EMPIRE FINANCIAL SOL	UTIONS OF THE PALM	BEACHES INC
	Firm/ Company	
845 WEST PALM BEACH	I ROAD UNIT 424	
	Address	
SOUTH BAY FL. 33493		
	City/ State and Zip Cod	e
EMPIREFINANCIALSOLUTIOS	2019@GMAIL.COM	
	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
MIGGIE GRAHAM	334 at (	, 564-4948
Name of Contact 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 & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy 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

## Articles of Amendment to Articles of Incorporation of

EMPIRE FINANCIAL SOLUTIONS OF THE PALM BEACHES INC

(Name (	of Corporation as currentl	y filed with the Florida Dept.	of State)	
P19000077147				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ado	pts the following amend	dment(s) to
A. If amending name, enter the new na	ame of the corporation:			
			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp." "Inc," or "	Co". A professional corporati		
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		624 NW 16TH STREET		
		BELLE GLADE FL. 33430	)	- 26
			<u> </u>	150 6 los
			<u> </u>	<u>ධ</u> ය
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		P O BOX 332	i	
		SOUTH BAY FL. 33493		
			_1	λl ₩
				<del></del>
D. If amending the registered agent an new registered agent and/or the new			of the	
Name of New Registered Agent	ROY L GRADDICK JR	_		
Mane of their registered agent	1225 WEST 10TH €\		<del></del>	
	(Florida str	vet address)		
New Registered Office Address:	RIVERA BEACH	. 1	33404 Florida	
		(City)	(Zip Code)	_
New Registered Agent's Signature, if c	hanning Degistaned Arent			
I hereby accept the appointment as regist			of the position.	
	/ / /	· ()/	_	
211Km		De La Calack	1 /1	

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 Doe	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	MIGGIE GRAHAM	845 WEST PALM BEACH RD 4
Add			SOUTH BAY FL 33493
X Remove			
2) Change	P	ROY L. GRADDICK JR	1225 WEST 10TH ST
X Add			RIVERA BEACH FL 33404
Remove			
3) Change	s 	ERNEST WILLIAMS	185 SW 10TH AVE
X Add			BELLE GLADE FL. 33493
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			<del></del>
Add			
Remove			

	ng additional Art eets, if necessary).	(Re specific)			
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C	ovides for an excl	hange, reclassifica	tion, or cancellatio	of issued shares,	
ii an amendment pr	ementing the ame	endment if not con	tained in the amen	<u>iment itselt:</u>	
provisions for impl	la indicata M/AX				
provisions for impl (if not applicab	le, indicate N/A)				
provisions for impl	le, indicate N/A)				
provisions for impl	le, indicate N/A)				
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provisions for impl	le, indicate N/A)				

	10/24/2019	
The date of each amendmen date this document was signed		, if other than the
P. C	10/25/2019	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	nis date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	re adopted by the shareholders. The number of votes cast for the amendrere sufficient for approval.	nent(s)
	re approved by the shareholders through voting groups. The following steed for each voting group entitled to vote separately on the amendment(s)	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and share	holder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and sharehold	er
10/24 Dated	M/2019 	
Se	By a director, president or other officer – if directors or officers have not elected, by an incorporator – if in the hands of a receiver, trustee, or other proported fiduciary by that fiduciary)	
	MIGGIE GRAHAM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	