## P20000657-66

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF	F CORPO	RATION: Wholesale Direct M	Aortgages, Inc.	
DOCUME	ENT NUMI	BER: P20000065766		· ·-
		of Amendment and fee are su	bmitted for filing.	
Please retu	rn all corre	spondence concerning this ma	tter to the followin	g:
		Gary Bowen		
			Name of Contac	et Person
		Wholesale Direct Mortgages,	Inc	
			Firm/ Com	pany
		5351 NW 106th Dr		
			Address	8
		Coral Springs, FL 33076		
			City/ State and	Zip Code
		Gary@Wholesaledirectmortg	ages.com	
		E-mail address: (to be us	-	il report notification)
For further		n concerning this matter, plea	se call: at (	464-7714
		of Contact Person	at (	Area Code & Daytime Telephone Number
Enclosed is	s a check fo	r the following amount made	payable to the Flor	ida Department of State:
<b>⊆</b> \$35 Fi	iling Fee	S43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Copy (Additional copenclosed)	Certificate of Status
	Amo Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street. Suite 810 Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Wholesale Direct Mortgages, Inc.

(Name of Corporation as curren	tly filed with the Florida De	pt. of State)	
P20000065766			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation :	adopts the fo	ollowing amendment(s
A. If amending name, enter the new name of the corporation:			
			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	A professional corporation	" or the abb name must	reviation "Corp.," contain the word
B. Enter new principal office address, if applicable:			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )			
	<del></del>		
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	<del></del>		
	****		) )
D. If any adia the majetaned court and/or registered office ad	Ideass in Florida, antay the ne	ama af tha	 !
<ol> <li>If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre</li> </ol>		anie o <u>r tue</u>	الله عب
Name of New Registered Agent		11.1	(a)
Name of New Registered Agent		T : 1	<u> </u>
(Florida	street address)	, ;==1	_ <del></del> _
		131 1.1	
New Registered Office Address:	(Ciny)	Florida	(Zip Code)
·			
New Registered Agent's Signature, if changing Registered Age	nt:	sas afelou sas	aitian
hereby accept the appointment as registered agent. I am familia	r wan and accept the obligate	ns oj tne po	smon.
Signature of New	Registered Agent, if changing		
Check if applicable			
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (1	1) (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.

Example:

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1)Change	P	Gary Bowen	5351 NW 106th Dr
Add			Coral Springs, FL 33076
Remove			
2) Change	<del></del>		
Add			
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
	·		<del></del>
Add			
Remove			

	2. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)					
ary Bowen is bei	ing added as Presi	dent with Karen	Mills Dickinson as	s President also.		<del>.</del>
		<del></del> -				
<del></del>	<del></del>				, i.e.	
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If an amendm	ent provides for	an exchange, re	classification, or o	cancellation of iss	ued shares.	
provisions fo	r implementing t	he amendment	if not contained in	the amendment	itself:	
(if not ap)	plicable, indicate	N/A)				
	·					
				·		
•						<u> </u>
						· .
•						

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	01/04/2021	
he date of each amendment(s) ad	option:	, if other than 1
ate this document was signed.		
01/04	1/2021	
ffective date <u>if applicable</u> :		<del></del>
	(no more than 90 days after amendment file date)	
ote: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements partment of State's records.	s, this date will not be listed as t
doption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareho	lder action and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the ame	endment(s)
must be separately provided for	roved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment	
The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
01/04/2021		
Dated		
Signature	rector, president or other officer – if directors or officers have r	
selected	rector, president or other officer – if directors or officers have r l, by an incorporator – if in the hands of a receiver, trustee, or o ed fiduciary by that fiduciary)	
	Karen Mills Dickinson	
	(Typed or printed name of person signing)	<del></del>
	President Kasen Mills Beterk	
•	(Title of person signing)	