# P2100002816H

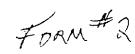
(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: Mr. Gary Bowen gave me permission Overthe phone add suffix "Inc" to his entity. AB 7/22/21				

Office Use Only



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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Mortgage Electron	nic Registration Systems, Ir	nc.
DOCUMENT NUM	D21000020164	· · · · · · · · · · · · · · · · · · ·	
The enclosed Articles	of Amendment and fee are si	abmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	Gary Bowen		
		Name of Contact Person	n
	-	Firm/ Company	
	5351 NW 106th Dr		
		Address	
	Coral Springs, FL 33076		
		City/ State and Zip Cod	e
	Gary@wholesaledirectmortg	ages.com	
	E-mail address: (to be te	sed for future annual report	notification)
For further information	n concerning this matter, plea	se call:	
Gary Bowen		954 at (	464-7714
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amo Divi	ling Address endment Section sion of Corporations Box 6327	Amend Divisio	Address ment Section n of Corporations

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

#### Articles of Amendment to Articles of Incorporation of

MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.

MURIGAGE ELECTRONIC REGISTS			
(Name o	of Corporation as current	ly filed with the Florida Dept. of State)	
P21000028164			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendment	:(s) to
A. If amending name, enter the new n	ame of the corporation:		
Irwin Raskin Revocable Trust , INC		The new	
name must be distinguishable and contain	Corp, " "Inc," or "Co".	company," or "incorporated" or the abbreviation "Corp.,"  A professional corporation name must contain the word	
B. Enter new principal office address,	if applicable:	401 £ Las Olas Bivd,	
(Principal office address MUST BE A S	TREET ADDRESS )	Fort Lauderdale, FL 33301	
C. Enter new mailing address, if appl			
(Mailing address MAY BE A POST	OFFICE BOX)		
D. If amending the registered agent an new registered agent and/or the new	id/or registered office add w registered office addres	ress in Florida, enter the name of the	
	Gary Bowen	<u></u>	
Name of New Registered Agent	5351 NW 106th		
,			
	•	reet address)	
New Registered Office Address:	Coral Springs,	Florida 33076	
		(City) (Zip Code)	
		•	
N	s		
New Registered Agent's Signature, if c		uith and accept the obligations of the position.	
	1	•	
	Signature of New I	Registered Agent, if changing	
Check if applicable			
☐ The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11)	(e), r.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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change	٠		
Add			
Remove 3) Change		_	
Add			·
Remove			
4) Change	d	_	
Add			
Remove			
5) Change			
Add			
Remove	4		
<ul><li>6) Change</li></ul>			
Add			
Remove			

(Attach additional sh	ieets, if necessary).	(Bu specific)				
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16			A* 11-41			
If an amendment p provisions for imp	lementing the ame	endment if not con	tained in the ome	ndment itself:	<u>.</u>	
(if not applicat	ole, indicate N/A)				•	
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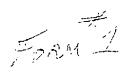
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The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	idopted by the incorporators, or board of directors without shareholder action	and shareholder
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
DatedSignature	2/22/2021	<del></del>
selec	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
'	Gary Bowen	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	<del></del>





### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESOLUTION OF THE BOARD OF DIRECTORS TO ADOPT AN ALTERNATE NAME FOR USE IN FLORIDA

(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I. the undersigned Gary Bowen		_, do hereby certify
(Name)		_c do hereby certify
that this Resolution of the Board of Directors of		
Mortgage Electronic Registration S	Systems, Inc.	
(Name of Corpora	tion)	
a corporation duly organized and existing under the laws of	Florida	
Ţ	(State or Countr	<del>y)</del>
was adopted on April 15th 2021		adopting the alternate
name of Fremont Investment & Loan,		
(Alternate Name) NOTE: Mu	st contain a corporate suff	lix)
for use in Florida as its real name is unavailable in Florida.		
Date: 04/15/2021		
	President	
Signature of Chairman, Vice Chairman of the Board, a director or any officer	Title of p	person signing

FILING FEE \$35

(No fee required if submitted with a foreign not for profit qualification or amendment)

Make checks payable to Florida Department of State and mail to:

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