## P21000028188

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JUN 23 2021 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	ORATION: US FORCLOSUR	E RESCUE INC	
	MBER: P21000028188		
	es of Amendment and fee are su	bmitted for filing.	
Please return all con	respondence concerning this ma	atter to the following:	
	GARY DELMOUR		
		Name of Contact Perso	n
	US FORCLOSURE RESCU	E INC	
		Firm/ Company	
	7777 DAVIE Rd Ext 302B		
		Address	· · · · · · · · · · · · · · · · · · ·
	DAVIE, FL 33024		
		City/ State and Zip Cod	e
	Usforclosure.rescue@gmail.	com	
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	ion concerning this matter, plea	se call:	
JAN DE LABEL		at (	216-5530
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 & 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Division The Co	Address Iment Section In of Corporations In the of Tallahassee J. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

US FORCLOSURE RESCUE INC

US FORCLOSURE RESCUE TRUC					
(Name	of Corporation as currentl	y filed with the Florida De	ot. of State	)	
P21000028188					
	(Document Number o	f Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation :	adopts the fo	ollowing amendm	ent(s) to
A. If amending name, enter the new n	ame of the corporation:				
	NIA			The nev	47
name must be distinguishable and contain "Inc.," or Co.," or the designation "( "chartered," "professional association,	n the word "corporation," "c Corp," "Inc," or "Co". 2	1 professional corporation		reviation "Corp.,	
B. Enter new principal office address, if applicable:		N/A			
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS )				- <del></del>
			<del></del>	* 0 =	1 3 April 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
				*	1
C. Enter new mailing address, if appl	icable:	11 /A		7	
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )		N/A			
					<b>&gt;</b>
B. If .					
<li>If amending the registered agent an new registered agent and/or the ne</li>			me of the		
Name of New Registered Agent	IVENS LOUIS	<b>-</b>			
Name of New Registered Agent	3360 Spanish Moss Ter Ar	ot 202, Lauderhill, FL 33319	)		
	(Florida str				
N . B	N	′Δ	r1 .1	Al /A	
New Registered Office Address:		(City)	_, Florida_	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent:	with and accept the obligation	ns of the no	vition	
merco, accept the appointment an region	erea agens. Tam jamina r	nur and accept the oongano	ns of the por	mon.	
	$\mathcal{O}$ · $\mathcal{I}$ .	-			
	Louis Iren				
	Signature of New Re	egistered Agent, if changing			
C15116151-1					

Check if applicable

<sup>☐</sup> The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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.

X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	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) X Change	RA	JAN DE LABEL	7777 DAVIE RD EXT 302B
Add			HOLLYWOOD, FL 33024
Remove			
2) Change	<u>RA</u>	<u>IVENS LOU</u> IS	3360 Spanish Moss Ter Apt 202
X Add			Lauderhill FL 33319
Remove 3) Change	P	JAN DE LABEL	5962 NW 24th PL
X Add			Sunrise, FL 33313
Remove			
4) Change	CEO	WILLER PETIT FRERE	2616 NW 47th LN
X Add			Lauderdale Lakes, FL 33313
Remove			
5) Change	V	ALTES JEAN	2561 NW 60 Ter
X Add			Sunrise, FL 33313
Remove			
6) Change	<u>T</u>	ELISNERT CHEVELON	8391 Sunset Strip Sunrise
X Add			Sunrise. Florida 33322
Remove			

If amending or adding additional Articles, enter change(s) here:  (Attach additional sheets, if necessary). (Be specific)	
Add: GARY DELMOUR as Secretary	
Address: 8011 SW 7th place, North Lauderdale, Fl 33068	
Add: JACQUES JEAN as Director	
Address: 810 SW 39 Ave, Fort Lauderdale, FL 33312	
Add: IDENER DORVIL as Director	
Address: 4840 NW 20th Street, Lauderhill, FL 33313	
<del></del>	
If an amendment provides for an exchange, reclassification, or cancellation of issued provisions for implementing the amendment if not contained in the amendment itse	<u>shares,</u> lf:
(if not applicable, indicate N/A)	_
	<del></del>
	_

to the state of

The date of each amendment(s) ad	04/24/2020 option:	if other than the
date this document was signed.	19000	
Effective date <u>if applicable</u> :	1/2020	
Enecuve date in applicable.	(no more than 90 days after amendme	nt file date)
Note: If the date inserted in this bidocument's effective date on the De	ock does not meet the applicable statutory filing in partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado action was not required.	oted by the incorporators, or board of directors with	hout shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast Ticient for approval.	t for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. To each voting group entitled to vote separately on the	The following statement camendment(s):
"The number of votes cast	or the amendment(s) was/were sufficient for appro	val
7 on 7 with one absente		
o,	(voting group)	<u> </u>
04/24/2020		
Dated		
Signature 2	xoch f	
	rector, president or other officer - if directors or off	ficers have not been
	, by an incorporator - if in the hands of a receiver,	trustee, or other court
appoint	ed fiduciary by that fiduciary)	
	GARY DELMOUR	LMOUR
	(Typed or printed name of person signing	ng)
	Secretary	
	(Title of person signing)	