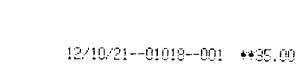
P21000080000

(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:
Q. SILAS
ელე გ 8 2021

Office Use Only



500377463315



COVER LETTER

TO: Amendment Section Division of Corporations

		OVED HOME LOANS IN		
DOCUMENT	NUMBER: P21000080000			
The enclosed A	rticles of Amendment and fee are s	submitted for filing.		
Please return al	l correspondence concerning this m	natter to the following:		
	TIFFANY HARGRAVE			
	Name of Contact Person			
	WE SAY APPROVED HO	OME LOANS INC		
		Firm/ Company		
	95079 STARLING COUR	RT		
	Address			
	FERNANDINA BEACH F	L 32034		
		City/ State and Zip Coo	le	
	TIFFANYHARGRAVE1@	GMAIL.COM		
	E-mail address: (to be a	used for future annual repor	t notification)	
	rmation concerning this matter, plea	ase call:	չ 405-7183	
TIFFANY HA		at (<u>904</u>	de & Daytime Telephone Number	
TIFFANY HA	RGRAVE	at (904 Area Co	ode & Daytime Telephone Number	
TIFFANY HA	RGRAVE Name of Contact Person heck for the following amount made	at (904 Area Co	ode & Daytime Telephone Number partment of State:	

Articles of Amendment to Articles of Incorporation



WE SAY APPROVED HOME LOANS INC

2021 DEC 10 AHT1: 08

(Name of Corporation	on as currently filed with the Florida Dept. of State)
P21000080000	TOTAL CONTRACT OF THE
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
WE SAY APPROVED HOME LOAN ASSISTANCE	CE INC The new
	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) D. If amending the registered agent and/or registered agent and/or registered agent and/or registered agent.	ed office address in Florida, enter the name of the
new registered agent and/or the new registered o	office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Regil I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Signa	ture of New Registered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (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	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change	mgr	KEVIN HARGRAVE	95079 STARLING COURT
Add			FERNANDINA BEACH FL 32034
Remove 2) Change			
Add Remove 3) Change Add	<u></u>		
Remove 4) Change Add	**************************************		
Remove 5) Change Add			
Remove 6) Change Add			
Add Remove			

	ing additional Art eets, if necessary).	(Be specific)			
					-
			· ·	· · · · · · · · · · · · · · · · · · ·	
					
				.	
. 					
			· · · · · · · · · · · · · · · · · · ·		
					•

	<u>rovides for an exc</u>	hange, reclassification	, or cancellation of i	ssued shares,	
^f an amendment p		endment if not contain	<u>ied in the amendme</u>	nt itself:	
provisions for imp	lementing the am				
provisions for imp	lementing the amole, indicate N/A)				
provisions for imp	lementing the am ole, indicate N/A)				
provisions for imp	elementing the am				
provisions for imp	elementing the am				
provisions for imp	lementing the am				
provisions for imp	lementing the am ble, indicate N/A)				
provisions for imp	elementing the am				
provisions for imp	elementing the am				
provisions for imp	elementing the am				
provisions for imp	elementing the am				
provisions for imp	elementing the am				
provisions for imp	elementing the am				
provisions for imp	elementing the am				

•

t

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 block does a document's effective date on the Department of	not meet the applicable statutory filing requirements, t f State's records.	his date will not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors without shareholde	er action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number of votes cast for the amend approval.	ment(s)
	ne shareholders through voting groups. The following sign group entitled to vote separately on the amendment(s)	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by	,"	
(vo	ting group)	
Dated 12 6 3	D21 Harman 10	
Signature(By a director, pre-	secent or other officer – if directors or officers have not	been
selected, by an inc	corporator - if in the hands of a receiver, trustee, or other	r court
appointed liquidar	y by that fiduciary)	
11+1-2	My Hargrave. (Typed or printed name of person signing)	
\cap	(Typey of printed name of person signing)	
Væ	sident	
	(Title of person signing)	