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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: T.C. CASH, INC.	<u></u> .			
DOCUMENT NUMB					
	f Amendment and fee are su	bmitted for filing.			
Please return all corres	ondence concerning this ma	tter to the following:			
	MARTINEZ, JESUS E				
-	Name of Contact Person				
-	Firm/ Company				
	1701 SW 23RD STREET HOUSE A				
-	Address				
	FORT LAUDERDALE, FL.	33315			
		City/ State and Zip Code	e		
ELIEC	CERM7@HOTMAIL.COM				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
MARTINEZ, JESUS I	} 	at (	238-1362		
Name o	f Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
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

T.C. CASH, INC

(Name of Corporation	n as currently filed	with the Florida Dept. of Sta	te)	
P96000041756		<del>-</del>	_	
(Docume	nt Number of Corpo	ration (if known)		
Pursuant to the provisions of section 607,1006, Florida 9 its Articles of Incorporation:	Statutes, this <i>Florida</i>	Profit Corporation adopts the	e following amendm	ient(s) i
A. If amending name, enter the new name of the cor	poration:			
			The new	16'
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	"Inc." or "Co"			
B. Enter new principal office address, if applicable:			1	
(Principal office address MUST BE A STREET ADDR	<u> </u>		2.5	
				וד
		<u> </u>	22 2	=
C. Enter new mailing address, if applicable:				ÌП
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		<u> </u>	0
			÷ 6	
			<del></del>	
D. If amending the registered agent and/or registere new registered agent and/or the new registered o		Florida, enter the name of th	<u>c</u>	
Name of New Registered Agent				
	(Florida street addr	ess)		
New Registered Office Address:		. Florid	a	
	(City)	.,,,,,,,,	(Zip Code)	
	_			
New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered agent. I		l accept the obligations of the	position.	
	<i>y</i>		<i>,,</i>	
Siona	ture of New Registers	ed Agent, if changing		

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:

 $P = President; V \neq Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$ 

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>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PD	MARTINEZ, JESUS E	1701 SW 23RD STREET
Add			HOUSE A
Remove			FORT LAUDERDALE, FL 33315
2) Change	_		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<del></del>	
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/4)	
provisions for implementing the amendment if not contained in the amendment itself:	
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provisions for implementing the amendment if not contained in the amendment itself:	
(y not applicable, indicate NA)	
<del></del>	

The date of each amendment(s date this document was signed.	) adoption:	, if other than the
_		
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendmer e sufficient for approval.	u(s)
	approved by the shareholders through voting groups. The following state for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareho	lder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
08/16/2 Dated	017	
Signature <b>9</b>	Relating	
(By sele	a director, president de other officer – if directors or officers have not beected, by an incorporator – if in the hands of a receiver, trustee, or other content of iduciary by that fiduciary)	
	JESUS E MARTINEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	