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COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORI	PORATION:	Community Finar	nce Corporation	
DOCUMENT NU	MBER:			
The enclosed Artic	cles of Amendment and	fee are submitted for filing	3.	
Please return all co	orrespondence concern	ng this matter to the follow	ving:	
		Luis M. Calvo		_
		Name of Contact Person		
	Co	nmunity Finance Corpor	ation	_
		Firm/ Company		
		5017 SW 139 Terrace		_
		Address		
		Miramar, Florida 33027	7	_
		City/ State and Zip Code		
	lui: E-mail address: (to	mcalvo@bellsouth.net be used for future annual report	notification)	
For further informa	ation concerning this m	atter, please call:		
	Nicoleta Calvo	at (305)	948-9555	
Name	of Contact Person	Area Code a	& Daytime Telephone Number	er
Enclosed is a check	k for the following amo	unt made payable to the Fl	orida Department of Star	te:
	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fe Certified Copy (Additional copy	Certificat r is enclosed) Certified	e of Status
Mailing Ao Amendmen Division of		Street Address Amendment Sec Division of Corp		

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

Articles of Amendment to Articles of Incorporation of

Finance Corporation	on
rently filed with the Florid	da Dept. of State)
mber of Corporation (if known	own)
06, Florida Statutes, this I	Florida Profit Corporation adopts the f
of the corporation:	
e designation "Corp," "In ofessional association," or plicable:	"company," or "incorporated" or ac," or "Co". A professional corporate the abbreviation "P.A."
<u>LI ADDKESS</u>)	
registered office address istered office address:	in Florida, enter the name of the
(Florida street	address)
<u> </u>	, Florida
(City)	, Florida
	of the corporation: the word "corporation," et designation "Corp," "In ofessional association," or plicable: ET ADDRESS) e: (CE BOX) registered office address istered office address:

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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>VP</u>	Julia Grant	5017 SW 139 Terrace Miramar, FL. 33027	
<u>o</u>	Mirta Candia	5017 SW 139 Terrace Miramar, FL, 33027	
0	Luis M. Calvo	5017 SW 139 Terrace Miramar, FL. 33027	
	ding or adding additional Article additional sheets, if necessary).		
			
<u>provisi</u>		ange, reclassification, or cancellation of the amendment if not contained in the amendment	

The date of each amendmen	t(s) adoption: June 26th, 2009
. Effective date <u>if applicable</u> :	June 26th, 2009 (date of adoption is required)
•	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	ere approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	·"
	(voting group)
action was not required.	ere adopted by the board of directors without shareholder action and shareholder acted by the incorporators without shareholder action and shareholder
action was not required.	
Dated_June	e 26th, 2008
sel	a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	Nicoleta Calvo
	(Typed or printed name of person signing)
	President
	(Title of person signing)