

P98000020958

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07/05/06--01011--003 \*\*35.00

Gf Amend

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** MADISON MORTGAGE FUNDING CO. INC.

**DOCUMENT NUMBER:** P98000020958

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ANTHONY MENNELLA  
(Name of Contact Person)

MADISON MORTGAGE FUNDING CO  
(Firm/ Company)

2002 SE. Elmhurst Road  
(Address)

Port Saint Lucie, FL 34952  
(City/ State and Zip Code)

For further information concerning this matter, please call:

Anthony Mennella at (772) 398 3424  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$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

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Articles of Amendment  
to  
Articles of Incorporation  
of

MADISON MORTGAGE FUNDING CO.

(Name of corporation as currently filed with the Florida Dept. of State)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P98000020958

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

**NEW CORPORATE NAME (if changing):**

N/A

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")  
(A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A.")

**AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE)** Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

Deleting present Registered Agent:

Leslie Kaplan, pres. Leslie Kaplan

499 Midvale St., Port Saint Lucie, FL 34982

Adding New Registered Agent: Pres.

Anthony Mennella - AMennella

2002 S.E. Elmhurst Rd

Port Saint Lucie, FL 34952

\* (Attach additional pages if necessary)

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

N/A

(continued)

\* additional official to be.

Roberta J. Mennella as - Secretary  
2002 S.E. Elmhurst Road  
Port Saint Lucie, FL 34952

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: MADISON MORTGAGE FUNDING CO.
2. The principal office address: 2002 S.E. Elmhurst Road  
Port Saint Lucie, FL 34952
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 3/4/98 Document number: P98000020958
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

LESLIE KAPLAN  
499 MIDVALE ST.  
PORT SAINT LUCIE, FL 34983

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

ANTHONY MENNELLA  
2002 SE ELMHURST RD  
(P.O. Box NOT acceptable)  
PORT SAINT LUCIE, FL 34952

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Leslie Kaplan  
(Signature of an officer or director)

LESLIE KAPLAN, PRES  
(Printed or typed name and title)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Anthony Menella  
(Signature of Registered Agent)

6/29/06  
(Date)

If signing on behalf of an entity:

ANTHONY MENNELLA  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314  
CR2E045 (8/05)

The date of each amendment(s) adoption: 7/1/06

Effective date if applicable: 7/1/06  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) **(CHECK ONE)**

- ☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided 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)"

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Signature

Leslie Kaplan

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

LESLIE KAPLAN

(Typed or printed name of person signing)

PRES

(Title of person signing)

**FILING FEE: \$35**