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COVER LETTER

TO: Amendment Section Division of Corporations

;

NAME OF CORPOR	AATION: Mortgage Market,	Inc.	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Robert C. Johnson		
		Name of Contact Person	
	Mortgage Market, Inc.		
		Firm/ Company	
	3770A US 1 South		
		Address	···
	St Augustine, FL 32086		
		City/ State and Zip Code	
	bob@mmi90.com		
	E-mail address: (to be us	sed for future annual report i	notification)
For further information	n concerning this matter, pleas	se call:	
Robert C. Johnson		904 at (794-2880 le & Daytime Telephone Number
Name o	of Contact Person	Area Cod	le & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	rtment of State:
□ \$35 Filing Fee	☐S43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	■\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 shassee, FL 32314	Division The Ce 2415 N	Address ment Section n of Corporations ntre of Tallahassee l. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

Mortgage Market, Inc.				
(<u>Name</u>	of Corporation as current	ly filed with the Florida Dep	ot. of State)	
S92263				
	(Document Number o	of Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	7,1006, Florida Statutes, this	Florida Profit Corporation a	dopts the following	g amendment(s) to
A. If amending name, enter the new n	name of the corporation:			
	N/A			
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,	n the word "corporation," " Corp," "Inc." or "Co".	A professional corporation i	or the abbreviation	_The new on "Corp.," 1 📚 word
R Enter new principal office address.	if upplicable.	NIA	A	E T
B. Enter new principal office address, (Principal office address MUST BE A S				
				m
			• <u>• • • • • • • • • • • • • • • • • • </u>	2
C. Enter new mailing address, if applicable:		NIA	OKID) 2: 35
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)			<u> </u>
D. If amending the registered agent an new registered agent and/or the ne	nd/or registered office add w registered office address	ress in Florida, enter the na	me of the	
Name of New Registered Agent	Robert C. Johnson			
	3770A US 1 South			
	(Florida sti	reet address)		
New Registered Office Address:	St Augustine		, Florida 32086	
New Registered Office Address.		(City)	_, r iorida(Zip C	 lode)
			•	
New Registered Agent's Signature, if c I hereby accept the appointment as registered.	tered agent. I am familiar	with and accept the obligation Pegistered Agent, if changing	ns of the position.	
	organiane of New R	egmered Agent, ij changing		
Check if applicable ☐ The amendment(s) is/are being filed p	oursuant 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	n Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PTD	ASSELTA, JAMES J.	3770A US 1 SOUTH
Add			ST. AUGUSTINE, FL 32086
X Remove			
2) Change	Director	Thatcher, Maya L	3770A US 1 SOUTH
Add			ST. AUGUSTINE, FL 32086
X Remove 3) Change	PS	Robert C. Johnson	3770A US 1 South
X Add			St Augustine, FL 32086
Remove	100		
4) Change	<u>VT</u>	Julie M. Johnson	3770A US 1 South
X Add			St Augustine, FL 32086
Remove			>
5) Change			XSSE 5
Add			
Remove			<u>5; </u>
6) Change			35
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
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f an amendment provides for an exch	ange, reclassification, or cancellation of issued share	es.	
provisions for implementing the amer (if not applicable, indicate N/A)	idment if not contained in the amendment itself:		
NA			_
· · · · · ·		 -	-
			_
			_
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			_

7/1/2022		
The date of each amendment(s) adoption:	_, if other t	than the
Effective date if applicable: 7/1/2022		
(no more than 90 days after amendment file date)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will a document's effective date on the Department of State's records.	not be liste	d as the
Adoption of Amendment(s) (CHECK ONF.)		
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and s action was not required.	hareholder	-n
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	F-5	
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	PH 2: 35	D
"The number of votes cast for the amendment(s) was/were sufficient for approval	35	
by" (voting group)	,	
Dated 7/1/2022		
Signature (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)	-	
Robert C. Johnson (Typed or printed name of person signing)		
President (Title of a read pine)		
(Title of person signing)		