

F97000002391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

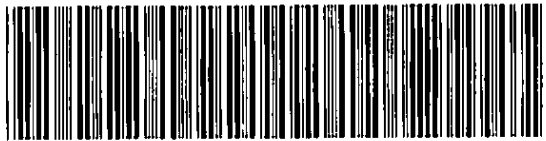
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300367099363

FILED

2021 JUN 23 AM 9:45

RECEIVED

2021 JUN 23 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NAME
CHG

JUN 24 2021

ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: OneSource Dealer Services, Inc

Name of Corporation

DOCUMENT NUMBER: 099022-25

F97000002391

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jennifer Davis/Legal

Name of Contact Person

Confie

Firm/Company

7711 Center Ave, Ste 200

Address

Huntington Beach CA 92647

City/State and Zip Code

regulatoryfilings@confie.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jennifer Davis

Name of Contact Person

at (714) 252-2500

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

\$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION
APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I
(1-3 MUST BE COMPLETED)

099022-25

F97000002391

(Document number of corporation (if known))

1. OneSource Dealer Services, Inc

(Name of corporation as it appears on the records of the Department of State)

2. California

(Incorporated under laws of)

3. 5/5/1997

(Date authorized to do business in Florida)

SECTION II
(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? 10/31/2019

5. Insure Express Insurance Service, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

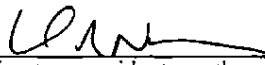
9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

2021 JUN 23 AM 9:45

FILED

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.



(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Carol R Newman

(Typed or printed name of person signing)

EVP/Secretary

(Title of person signing)

FILING FEE \$35.00



I hereby certify that the foregoing transcript of 1 page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

JUN 21 2021

A handwritten signature in black ink, appearing to read "Shirley N. Weber".

SHIRLEY N. WEBER, Ph.D., Secretary of State

A0835072



Secretary of State
Certificate of Amendment of
Articles of Incorporation
Name Change Only - Stock

AMDT-
STK-NA

FILED
Secretary of State
State of California
OCT 31 2019

Emm/V

IMPORTANT — Read instructions before completing this form.

Filing Fee — \$30.00

Copy Fees — First Page \$1.00 & .50 for each attachment page;
Certification Fee — \$5.00

icc This Space For Office Use Only

1. **Corporation Name** (Enter the exact name of the corporation as it currently is recorded with the California Secretary of State.)

OneSource Dealer Services, Inc.

2. **7-Digit Secretary of State File Number**

1330643

3. **New Corporation Name**

Item 3a: Enter the number, letter or other designation assigned to the provision in the Articles of Incorporation being amended (e.g., "I," "First," or "A"). See Instructions if the provision in the Articles of Incorporation being amended does not include a number, letter, or other designation. Any attachment is made part of this document.

Item 3b: Enter the new corporate name.

3a. Article FIRST of the Articles of Incorporation is amended to read as shown in Item 3b below:

3b. The name of the corporation is Insure Express Insurance Service, Inc.

4. **Approval Statements**

4a. The Board of Directors has approved the amendment of the Articles of Incorporation.

4b. Shareholder approval was (check one):

By the required vote of shareholders in accordance with California Corporations Code section 902. The total number of outstanding shares of the corporation entitled to vote is 10,000. The number of shares voting in favor of the amendment equaled or exceeded the vote required. The percentage vote required was more than 50%.

Not required because the corporation has no outstanding shares.

5. **Read, sign and date below (See instructions for signature requirements. Note: Both lines must be signed.)**

We declare under penalty of perjury under the laws of the State of California that the matters set forth herein are true and correct of our own knowledge and we are authorized by California law to sign.

10/25/19
Date

Cesar Soriano
Signature

Cesar Soriano
Type or Print Name of CEO

10/25/19
Date

Carol R Newman
Signature

Carol R Newman
Type or Print Name of Secretary