

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

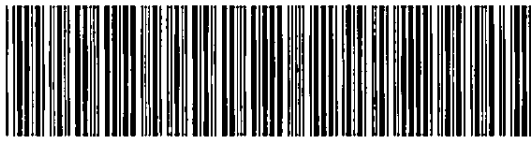
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100314043781

06/04/18--01013--015 **35.00

SECRETARY OF STATE
TALLAHASSEE FLORIDA

JUN -4 P 3 31

FILED

JUN 07 2013

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PALM COAST ASSOCIATION of HEALTH UNDERWRITERS, INC.

DOCUMENT NUMBER: NO5000007977

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

Please return all correspondence concerning this matter to the following:

Travis Bradley Tunis
(Name of Contact Person)

Palm Coast Association of Health Underwriters, Inc.
(Firm/ Company)

1023 Shady Lakes Circle
(Address)

Palm Beach Gardens, FL 33418
(City/ State and Zip Code)

brad@tunisgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Travis Bradley Tunis at (561) 339-4398
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- \$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

Palm Coast Association of Health Underwriters, Inc

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

N05000007977

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

_____ The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

1023 Shady Lakes Circle
Palm Beach Gardens, FL 33418

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

1023 Shady Lakes Circle
Palm Beach Gardens, FL 33418

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent: Travis Bradley Tunis

1023 Shady Lakes Circle
(Florida street address)

New Registered Office Address: Palm Beach Gardens, Florida 33418
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

x T. B. Tunis

Signature of New Registered Agent, if changing

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN - 4 P 3 97

FILED

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:

<input checked="" type="checkbox"/> Change	<u>PT</u>	<u>John Doe</u>
<input checked="" type="checkbox"/> Remove	<u>V</u>	<u>Mike Jones</u>
<input checked="" type="checkbox"/> Add	<u>SV</u>	<u>Sally Smith</u>

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>P</u>	<u>Alexis DeLuca</u>	<u>352 Window Rock Dr</u> <u>Wellington, FL 33414</u>
2) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>T</u>	<u>Travis Bradley Twiss</u>	<u>1023 Shady Lakes Cir.</u> <u>Palm Beach Gardens FL 33418</u>
3) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>VP</u>	<u>Steven Israel</u>	<u>4204 Manor Forest Tr</u> <u>Brynton Beach FL 33436</u>
4) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>P</u>	<u>Arthur Hoffman</u>	<u>5074 NW 86th Way</u> <u>Ozark Springs FL 33067</u>
5) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>T</u>	<u>Albert Wester</u>	<u>6114 Wood Creek Ct</u> <u>Jupiter FL 33458</u>
6) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>S</u>	<u>Deborah Neubert</u>	<u>2225 SW 15th St # 231</u> <u>Deerfield Beach, FL</u> <u>33442</u>

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: _____
(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 not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.
- There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated 5/11/18

Signature Albert Wester
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

ALBERT WESTER
(Typed or printed name of person signing)

Treasurer
(Title of person signing)