

900000081125

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

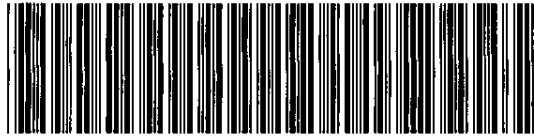
(Business Entity Name)

(Document Number)

Certified Copies 3 Certificates of Status 4

Special Instructions to Filing Officer:
Note: 3 Certified
4 CUS'S showing name change
4 CUS'S with new name

Office Use Only



900192989359

name change
amend

03/03/11--01028--002 **87.50

03/03/11--01028--003 **43.75

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2011 MAR -3 PM 1:03
NOT RETURNED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2011 MAR -3 PM 2:52

FILED

DR
3/3/11



UCC Filing & Search Services, Inc.
 1574 Village Square Boulevard, Suite 100
 Tallahassee, Florida 32309
 (850) 681-6528

HOLD
 FOR PICKUP BY
 UCC SERVICES
 OFFICE USE ONLY

March 3, 2011

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

CoAdvantage Insurance Services, Inc. nka Complete Insurance Source, Inc.

Filing Evidence

- Plain/Confirmation Copy - 1 set
- Certified Copy - 3 sets

Type of Document

- ~~Certificate of Status~~
- Certificates of Good Standing - 4 on new name
- Articles Only
- All Charter Documents to Include Articles & Amendments
- Fictitious Name Certificate
- Other - 4 Certificates of fact referencing name change

Retrieval Request

- Photocopy
- Certified Copy

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input checked="" type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of RA Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Reports
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	Reinstatement

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Articles of Amendment
to
Articles of Incorporation
of

FILED

COADVANTAGE INSURANCE SERVICES, INC.

2011 MAR -3 PM 2:52

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P00000081125

(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:

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

COMPLETE INSURANCE SOURCE, INC.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

N/A

*(Principal office address **MUST BE A STREET ADDRESS**)*

C. Enter new mailing address, if applicable:

N/A

*(Mailing address **MAY BE A POST OFFICE BOX**)*

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:

SHANE STREUFERT

New Registered Office Address:

111 W. JEFFERSON ST., STE 100

(Florida street address)

ORLANDO

(City)

, Florida 32801

(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.


Signature of New Registered Agent, if changing

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>	<u>Address</u>	<u>Type of Action</u>
<u>CFO</u>	<u>MARK LOWREY</u>	<u>111 W. JEFFERSON ST.</u> <u>SUITE 100</u> <u>ORLANDO, FLORIDA 32801</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>ASEC</u>	<u>DAVID FERNANDEZ</u>	<u>111 W. JEFFERSON ST.</u> <u>SUITE 100</u> <u>ORLANDO, FLORIDA 32801</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>EVP</u>	<u>BENJAMIN R HEWITT</u>	<u>111 W. JEFFERSON ST.</u> <u>SUITE 100</u> <u>ORLANDO, FLORIDA 32801</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

N/A

F. If an amendment provides for an 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

Officer/Director Amendment

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
CFO	Shane Streufert	111 W. Jefferson St. Suite 100 Orlando, FL 32801	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

The date of each amendment(s) adoption: MARCH 1, 2011
(date of adoption is required)

Effective date if applicable: N/A
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

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.

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):*

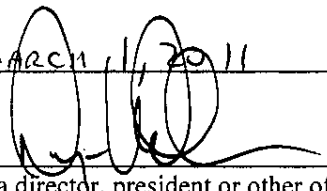
“The number of votes cast for the amendment(s) was/were sufficient for approval

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.

Dated MARCH 1, 2011

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)

DAYNE WILLIAMS
(Typed or printed name of person signing)

CEO
(Title of person signing)