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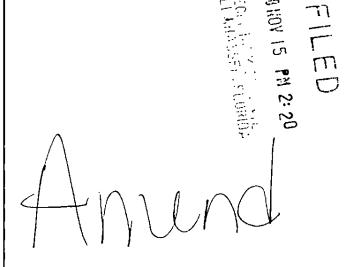
| (Requestor's Name)                      |
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| PICK-UP WAIT MAIL                       |
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I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

| NAME OF CORPOR                        | ATION: ADA'S INSURAN   | CE CORP  |   |
|---------------------------------------|--|--|---|
| DOCUMENT NUMB                         | er: <u>P13000</u>  | 091339   |   |
| The enclosed Articles of              | f Amendment and fee are su   | ibmitted for filing.   |   |
| Please return all corresp             | oondence concerning this ma  | utter to the following:  |   |
| į                                     | DALILA ALEMAN  |  |   |
| -                                     |  | Name of Contact Perso  |   |
| į.                                    | ADA'S INSURANCE CORI   |  |   |
| -<br>-                                |  |  |   |
| <b>\$</b>                             | 8600 NW 101 PL   | Firm/ Company  |   |
| -                                     |  | Address  |   |
| 1                                     | OORAL, FL 33178  |  |   |
| _                                     | · · · · · · · · · · · · · · · · · · ·                                  | City/ State and Zip Cod  | e   |
| DALII                                 | .ASDLR76@GMAIL.COM   |  |   |
|                                       |  | sed for future annual report                                       | notification)   |
| For further information DALILA ALEMAN | concerning this matter, pleas  | se call:<br>786<br>at (  | 368-7767  |
| Name of                               | Contact Person   |  | de & Daytime Telephone Number   |
| Enclosed is a check for               | the following amount made  |  |   |
| S35 Filing Fee                        | □\$43.75 Filing Fee & Certificate of Status                            | □\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)     |
| Amen<br>Divisi<br>P.O. I              | ng Address dment Section ion of Corporations Box 6327 hassee, FL 32314 | Amend<br>Divisio<br>Clifton<br>2661 F                              | Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301 |

## Articles of Amendment to Articles of Incorporation of

| Λ  | 21471  | INSI   | HP A   | NCT | CORE   |
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| /۱ | 1775.3 | 113.31 | 110 20 |     | V.V/NI |

| ADA'S INSURANCE CONT  | F.C   | Had with the Planta Dant of Conta  |
|---|---|--|
| ( <u>Name</u>   | of Corporation as currently t               | iled with the Florida Dept. of State)  |
|   | (Document Number of C                       | orporation (if known)  |
| Pursuant to the provisions of section 607 its Articles of Incorporation:  | ,1006, Florida Statutes, this $Fl$          | orida Profit Corporation adopts the following amendment(s) to  |
| A. If amending name, enter the new n.   | ame of the corporation:                     |  |
|   |   | The new  |
|   | nation "Corp." "Inc." or "Co                | "company," or "incorporated" or the abbreviation<br>". A professional corporation name must contain the<br>4." |
| B. Enter new principal office address, (Principal office address MUST BE A S                                    |   |  |
| C. Enter new mailing address, if apple (Mailing address MAY BE A POST)  D. If amending the registered agent are | OFFICE BOX)  id/or registered office addres | s in Florida, enter the name of the  |
| hew registered agent and/or the ne  | w registered office address:                |  |
| Name of New Registered Agent  | DALILA SOFIA ALEMAN                         |  |
|   | 474 EAST 49TH STREET U                      | NET 101  |
|   | (Florida street                             | address)   |
| New Registered Office Address:  | HIALEAH                                     | . Florida 33013  |
|   | (C)   | ty) (Zip Code)   |
| New Registered Agent's Signature, if c<br>I hereby accept the appointment as regist                             | tered agent. I am familiar with             | h and accept the obligations of the position.  |
|   | Signature of New Regi                       | istered 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)

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 Do  | <u>e</u>    |                 |
|-------------------------------|--------------|----------|-------------|-----------------|
| X Remove                      | <u>y</u>     | Mike Jo  | nes         |                 |
| X Add                         | <u>sv</u>    | Sally Sn | <u>iith</u> |                 |
| Type of Action<br>(Check One) | <u>Title</u> |          | Name        | <u>Addres</u> s |
| 1)Change                      |              | _        |             |                 |
| Add                           |              |          |             |                 |
| Remove                        |              |          |             |                 |
| 2) Change                     |              | _        |             |                 |
| Add                           |              |          |             |                 |
| Remove                        |              |          |             |                 |
| 3) Change                     |              |          |             |                 |
| Add                           |              |          |             |                 |
| Remove                        |              |          |             |                 |
| 4) Change                     |              |          |             |                 |
| Add                           |              |          |             |                 |
| Remove                        |              |          |             |                 |
| 5) Change                     |              |          |             |                 |
| Add                           |              |          |             |                 |
| Remove                        |              |          |             |                 |
|                               |              |          |             |                 |
| 6) Change                     |              | _        |             |                 |
| Add                           |              |          |             |                 |
| Remove                        |              |          |             |                 |

|                                      | ling additional Articles, heets, if necessary). (B   | 'e specific)         |                    |                |             |
|--------------------------------------|--|----------------------|--------------------|----------------|-------------|
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| f an amendment r                     | rovides for an exchange  | e, reclassification. | or cancellation of | issued shares. |             |
|                                      | lementing the amendm   | ent if not contain   | ed in the amendme  | nt itself:     |             |
| provisions for imp                   | and the second of the second o |                      |                    |                |             |
| provisions for im<br>(if not applica | ne, indicate (NA)  |                      |                    |                |             |
| provisions for imp                   | He, indicale N/A)  |                      |                    |                |             |
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| provisions for imp                   | e. maicate N/A)  |                      |                    |                |             |

|   | 11/1/2018  | , if other than th      |
|---|--|-------------------------|
| The date of each amendn date this document was sign |  | , it other than to      |
| Effective date <u>if applicab</u>                   | 11/1/2018  |                         |
| Effective date <u>it applican</u>                   | (no more than 90 days after amendment file date)   |                         |
|   | in this block does not meet the applicable statutory filing requirements, this date won the Department of State's records.   | ill not be listed as th |
| Adoption of Amendment                               | (s) ( <u>CHECK ONE</u> )   |                         |
| The amendment(s) was by the shareholders wa         | /were adopted by the shareholders. The number of votes cast for the amendment(s) s/were sufficient for approval.   |                         |
|   | /were approved by the shareholders through voting groups. The following statement vided for each voting group entitled to vote separately on the amendment(s):   |                         |
| "The number of v                                    | rotes cast for the amendment(s) was/were sufficient for approval   |                         |
| by  | (voting group)   |                         |
|   | (voting group)   |                         |
| ☐ The amendment(s) was action was not required      | /were adopted by the board of directors without shareholder action and shareholder   |                         |
| ☐ The amendment(s) was action was not required      | were adopted by the incorporators without shareholder action and shareholder.  |                         |
| 11<br>Dated<br>Signatur                             | e Valila D. Alemon   |                         |
| , , , g. m. m                                       | (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) |                         |
|   | DALILA SOFIA ALEMAN  |                         |
|   | (Typed or printed name of person signing)  |                         |
|   | President  |                         |
|   | (Title of person signing)  |                         |

. . .