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## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN EL-MAG INSURANCE CORP.

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July 7, 2016

## FLORIDA DEPARTMENT OF STATE Division of Corporations

EL-MAG INSURANCE CORP. 1241-81K NW 40TH AVENUE LAUDERHILL, FL 33313

SUBJECT: EL-MAG INSURANCE CORP.

REF: P15000040799

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The above referenced entity is a Florida for profit corporation but page 4 of the document you have submitted is prepared pursuant to Florida Statute 617 for a Florida not for profit corporation. Please submit the correct page pursuant 607 Florida statutes for a for profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II FAX Aud. #: 816000163069 Letter Number: 716A00014210

16 JUL -7 AM 8: 37

SEE AND THE STA

## Articles of Amendment to Articles of Incorporation

	oř.		
	EL-MAG INSURANC	E CORP.	
(Name	of Corporation as currently	filed with the Florida Dem. o	of State)
-	P15000040799		
	(Document Number of	Corporation (if known)	·
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this F	Turida Profit Corporation ndos	ots the following amendment(s) to
A. Maniending pane, enter the new o	ame of the corporation:		
	1		The new
name must be distinguishable and co "Corp.," "Inc.," or Co.," or the deely word "chartered," "professional associa	nation "Carp," "Inc," or "C	o". A professional corporation	ted" or the abbreviation on name must contain the
B. Enter new principal office address. (Principal office address MUST BE A S	If applicable: TREET ADDRESS )		
: C. <u>Enter new mailine address, if appl</u>			<del></del>
(Muiling address MAY BE A POST	OFFICE BOX)	reprinting the ballion of the second	
D. <u>If amonding the registered agent an</u> active registered agent and/or the ne-		s in Florida, enter the name t	of the
Name of New Registered Agent	ERIC SALINAS		,
THE VETTER IN FRICTION ARCHIT	1241-81K NW 40TH AVEN	UE ·	
	(Florida street	· ·	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address.	LAUDERHILL	ri	orida_33313
	(0)	ity)	(Zip Code)
		,	
lew Registered Apont's Signature, if cl	mandan Dankarand Adams		
hereby accept the appointment as registe	ered agent. I am familiar with	and accept the obligations of	tha position.
	-		
1			
<del></del>	Signature of New Regi	stered frent, if Changing	-
	, , , , , , , , , , , , , , , , , , ,		\
		) /	
	-		

Page I of 4

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:

(Alluch additional sheets, if necessary)

Please note the officeridirector 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 Junes is listed as the V. There is a change, Mike Jones heaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, FT as a Change, Mike Junes, V as Remove, and Sally Smith, SV as an Add.

X Clunge	PT	John Doc	
∑ Кеточе	¥	Mike Joney	
_X Add	<u>57</u>	Solly Smidj	
Type of Action (Check One)	Title	Nume	<u>∆ddres</u> s
1) Change	PD	MAGDALENA J. SALINAS	1241-81K NW 40TH AVENUE
A46			LADERHILL FL 33313
X Remove			· · · · · · · · · · · · · · · · · · ·
2) Change	PD	ERIC SALINAS	13264 SW 50TH STREET
_XAdd			MIRAMAR, FL 33027
Remove			
3 ) Change			
Add			<b>10</b> 11
Remove			
4)Change	<del>,,</del>	·	
Add			غيستام خور ويستند من سيند
Кстоус			
) Change			
Add			
Remove			suc. 11
Change			
Add		•	
Remove			

<u>U amending or addine additional Art</u> neuch additional sheets, if necessoary).	(Bit specific)	
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The date of each amendment(s) ad	ЛЛ_Y 6, 2016	if other than the
date this decument was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
	(no mare than 90 days after amendment (ité date)	
Note: If the date inverted in this bidocument's effective date on the Dep	eck does not meet the applicable statutory filing requirements, this services of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The assendment(s) was/were ador by the utarcholders was/were and	oted by the shareholders. The number of votes cast for the swendinen Delete for approval.	r(=)
The smendment(s) was/were apply ment be separately provided for	word by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s);	Merit
"The mumber of votes cast i	or the amendment(s) was/were sufficient for approval	
by	(noting group)	
	(world Bush)	
C The athendromat(x) was/were adequation was not coquired.	sted by the board of directors without shaubolder materials finitehols	der .
The amendment(s) was/were adoption was not required.	ted by the incorporators without situachtilder action and chareholder	
Dnted	TUEY 6, 2016	
Signature	Myalus	
(By a die	petar, president of other officer - it directors or afficers have not been by an incolparator - it in the hands of a receiver, trustee, or other con-	1
	d fiduciary by dist fiduciary)	1 <b>1.</b>
	Magda Lena J. Salinas	
_	(Typet) or printed name of person rigning)	
	PRESIDENT	
_	Mariella of manage visit in	<del></del>