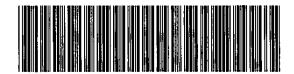
P150000072684

(Req	uestor's Name)	. ,
(Add	lress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
Special Instructions to F	filing Officer:	





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Amendica

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: WORLD INSURA	NCE SERVICES, INC.			
DOCUMENT NUMBI	P15000072684				
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.			
Please return all corresp	ondence concerning this mat	ter to the following:			
J	ANE BYNOE				
_		Name of Contact Persor	1		
\	WORLD INSURANCE SER	VICES, INC.			
-		Firm/ Company			
4	440 SAWGRASS CORPORATE PARKWAY, SUITE 210				
_	Address				
5	SUNRISE, FL 33325				
_		City/ State and Zip Code	3		
JANE(@WCAWORLD.COM				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	concerning this matter, pleas	e call:			
BRYCE BARNHART		at (378 6309		
Name of	Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	the following amount made p	payable to the Florida Depa	artment 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)		
Amen Divisi P.O. I	ng Address dment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Division Clifton	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

WORLD INSURANCE SERVICES, INC.

ZOISNOV SAM 8:30 (Name of Cornoration as currently filed with the Florida Dept. of State)

D. #00005540.4		
P15000072684		SEE
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	; Florida Profit Corporation	adopts the following amendme
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation". "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corpo	The new porated" or the abbreviation pration name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered office address		ame of the
Name of New Registered Agent	<u> </u>	
(Florida s	treet address)	
·		D1 11
New Registered Office Address:	(City)	, Florida

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)

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.

X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	EVP	MONICA LEE	440 SAWGRASS CORP PKWY
X Add			STE 210
Remove			SUNRISE, FL 33325
2) Change			
Add			
Remove			
3) Change	 .		
Add			-
Remove			
4)Change			
Add		-	
Remove			
5) Change	<u> </u>		
Add			-
Remove			
6) Change	_		
Add			
Remove			

	(Be specific)
/A	
· · · · · · · · · · · · · · · · · · ·	
If an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
'A	

The date of each amendment(s) a	doption:	, 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 document's effective date on the D	block does not meet the applicable statutory filing requirements, this date epartment of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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	25	
•	(voting group)	
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder	
10/29/201	5	
Dated		
Signature		
selecte	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	BRYCE BARNHART	
	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
	PRESIDENT	
	(Title of person signing)	