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Amend

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: MB FINANCIAL	AND INSURANCE SERV	YICES INC
	BER: P15000078099		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	MARLENE MUNOZ		
		Name of Contact Person	n
	MB FINANCIAL AND INS	URANCE SERVICES INC	
		Firm/ Company	
	5493 NW 171 TERRACE	. ,	
		Address	
	MIAMI GARDENS,F L3305	55	
		City/ State and Zip Cod	e
ММ	JNOZ@MUNOZACCOUNT	ING.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information MARLENE MUNOZ	n concerning this matter, pleas	se call: at (9109655
	of Contact Person	at () de & Daytime Telephone Number
	or the following amount made		
■ \$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)
Am Div P.O	iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314	Ameno Divisio Clifton 2661 E	Address dment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

MB FINANCIAL AND INSURANCE SERVICES IN	C
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(<u>Name o</u>	of Corporation as currently	filed with the Florida Dept. of State)	
1130000110077	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the follow	wing amendment(s)
A. If amending name, enter the new na	nme of the corporation:	•	
	ation "Corp " "Inc," or "("," "company," or "incorporated" or the Co". A professional corporation name m.	
B. Enter new principal office address, (Principal office address MUST BE A S	<u>if applicable:</u>	N/A	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
D. If amending the registered agent an new registered agent and/or the new			2015 OCT
Name of New Registered Agent	IVA	7	2 1
<u>New Registered Office Address:</u>	(Florida stre	et address), Florida	PH 2: 25
New Registered Agent's Signature, if c		ith and accept the obligations of the positio	on.
	NA	egistered Agent, if changing	
	Signature of New R	egistered 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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	V	BARBARA YAMILKA MIGUEL	5493 NW 171 TERRACE
X Add			MIAMI GARDENS, FL 33055
Remove			
2)Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		<u>. </u>	
Add			
Remove			
5) Change	4		
Add			
Remove			
6) Change		_	
Add			
Remove			

E. If amending or adding add (Attach additional sheets, if r	itional Articles, enter c necessary). (Be specific	hange(s) here:		
N/A	(Se speed)	-7		
				· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·	.	
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				<u> </u>
F. If an amendment provides provisions for implementi	for an exchange, reclas	sification, or cancella	ition of issued shares, nendment itself:	
(if not applicable, indic	cate N/A)	t contained in the an	rendinent useu.	
N/A				
				18 H 8 H
·				
				-

•		09/27/2015	
	each amendment(s) adopt ument was signed.	ion:	, if other than the
· ·	09/21/2 0	015	
Efficiency	ete <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
Note: 1 i doc	e date inserted in this block effective date on the Departs	does not meet the applicable statutory filing requirements, this date was a of State's records.	rill not be listed as th
A dv .	f Amendment(s)	(CHECK ONE)	
2 0 6	idment(s) was were adopted areholders wes/were sufficient	by the shareholders. The number of votes cast for the amendment(s) cut for approval.	
		the shareholders through voting groups. The following statement the voting group entitled to vote separately on the amendment(s):	
	re number of votes east for t	he unendment(s) was/were sufficient for approval	
	MARLENE MUNOZ		
	-	(voting group)	
D	iment(s) we (were adopted a not require.	He board of directors without shareholder action and shareholder	
□ () (i) ()	idment(s) was (were adopted a not require)	the the incorporators without shareholder action and shareholder	
	O/27/2015 Dated	——————————————————————————————————————	
	selected, by appointed :	or resident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court is a large by that fiduciary)	
		(Typed or printed name of person signing)	
	PRI	ES UNT	
	_	(Title of person signing)	=

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