

P97000009767

OFFICE USE ONLY (Document #)

LAZARUS CORPORATE FILING SERVICE, INC.

(Requestor's Name)

3320 S.W. 87th AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip) (Phone #)

LOCAL REPRESENTATIVE TALLAHASSEE

300002470773--6

-03/27/98--01066--007

\*\*\*\*\*35.00 \*\*\*\*\*35.00

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. a & G Insurance Agency (Corporation Name) Amend (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

- ☒ Walk in ☒ Pick up time 2:00 ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED  
98 MAR 27 PM 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Name 3/27/98

| NEW FILINGS       |                   | AMENDMENTS   |  |
|-------------------|-------------------|--|--|
| Profit            | Document Examiner | <input checked="" type="checkbox"/> Amendment                            |  |
| NonProfit         | Updater           | <input checked="" type="checkbox"/> Resignation of R.A. Officer/Director |  |
| Limited Liability | Updater           | <input checked="" type="checkbox"/> Change of Registered Agent           |  |
| Domestication     | Verifier          | <input checked="" type="checkbox"/> Dissolution/Withdrawal               |  |
| Other             | Acknowledger      | <input checked="" type="checkbox"/> Merger                               |  |
| W.P. Verityer     |                   |  |  |

| OTHER FILINGS            |                  |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report    |
| <input type="checkbox"/> | Fictitious Name  |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/QUALIFICATION |                     |
|----------------------------|---------------------|
| <input type="checkbox"/>   | Foreign             |
| <input type="checkbox"/>   | Limited Partnership |
| <input type="checkbox"/>   | Reinstatement       |
| <input type="checkbox"/>   | Trademark           |
| <input type="checkbox"/>   | Other               |

RECEIVED  
98 MAR 27 AM 11:46  
DIVISION OF CORPORATION

Examiner's Initials

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF

FILED  
98 MAR 27 PM 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

A&G INSURANCE AGENCY  
(present name)

*Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following articles of amendment to its articles of incorporation:*

**FIRST:** Amendment(s) adopted: (indicate article number(s) being amended, added or deleted)

ARTICLE IV THE NAME AND ADDRESS OF THE REGISTERED AGENT IS:

MIGUELINA RODRIGUEZ  
741 East 46 Street  
HIALEAH, FLA 33013

ARTICLE VI DIRECTORS, THE NEW PRESIDENT OF THE CORPORATION  
WILL BE: MIGUELINA RODRIGUEZ 741 East 46 Street Hialeah, Fla

**SECOND:** 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, are as follows:

THIRD: The date of each amendment's adoption: 03-26-98

FOURTH: Adoption of Amendment(s) (check one)

- ☒ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups.

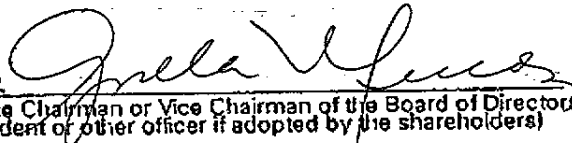
*The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"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.

Signed this 26 day of MARCH, 1998

Signature



(By the Chairman or Vice Chairman of the Board of Directors,  
President or other officer if adopted by the shareholders)

OR

(By a director if adopted by the directors)

OR

(By an incorporator if adopted by the incorporators)

GISELA MUNOZ

Typed or printed name

PRESIDENT

Title

**CERTIFICATE OF DESIGNATION**  
**REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of sections 607.0501 or 617.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the corporation is: A & G INSURANCE AGENCY  
4296 PALM AVENUE HIALEAH, FLA 33012
2. The name and address of the registered agent and office:  
MIGUELINA RODRIGUEZ  

(NAME)

741 EAST 46 STREET  

(P.O. BOX NOT ACCEPTABLE)

HIALEAH, FLORIDA 33013  

(CITY/STATE/ZIP)

FILED  
98 MAR 27 PM 1:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY ACCEPT THE APPOINTMENT AS REGISTERED AGENT AND AGREE TO ACT IN THIS CAPACITY. I FURTHER AGREE TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATING TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION AS REGISTERED AGENT.

SIGNATURE

*Miguelina Rodriguez*

DATE

*3/26/98*

REGISTERED AGENT FILING FEE: \$35.00