P99000049941

| | (Requestor's Name) | |
|----------------------|--------------------------|--------|
| | (Address) | |
| | (Address) | |
| | (City/State/Zip/Phone #) | |
| PICK-UF | P WAIT | MAIL |
| | (Business Entity Name) | |
| | (Document Number) | |
| Certified Copies | Certificates of | Status |
| Special Instructions | to Filing Officer: | |
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Office Use Only



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I ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPO | RATION: A Professional Ins | urance Agency of Brevard, Inc | | | | | |
|--------------------------------|---|---|--|--|--|--|--|
| DOCUMENT NUM | P00000040041 | | | | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | | | | | |
| Please return all corre | espondence concerning this ma | tter to the following: | | | | | |
| | J. Wayne Edens | | | | | | |
| | Name of Contact Person | | | | | | |
| | J. W. Edens Holdings, Inc. | | | | | | |
| | | Firm/ Company | | | | | |
| | 4650 S. Hopkins Avenue | | | | | | |
| | | Address | | | | | |
| | Titusville, FL 32780 | | | | | | |
| | | City/ State and Zip Code | | | | | |
| wede | ens@jwedens.com | | | | | | |
| | 5. | sed for future annual report notification) | | | | | |
| | | · | | | | | |
| For further information | on concerning this matter, pleas | se call: | | | | | |
| Stanley E. Retz | | at (321) 267-2190 | | | | | |
| | of Contact Person | at () | | | | | |
| | • | | | | | | |
| Enclosed is a check for | or the following amount made | payable to the Florida Department of State: | | | | | |
| \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) | | | | | |
| Mailing Address Street Address | | | | | | | |
| | endment Section | Amendment Section | | | | | |
| | ision of Corporations . Box 6327 | Division of Corporations | | | | | |
| | . DOX 0327 Jahassee FL 32314 | Clifton Building 2661 Executive Center Circle | | | | | |

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation

| Articles of A | Amendment corporation f cly filed with the Florida Dept. of State) |
|--|--|
| to Articles of In | corporation 2015 |
| Articles of the | f OFC |
| A Professional Insurance Agency of Brevard , Inc. | The second |
| (Name of Corporation as current | tly filed with the Florida Dept. of State) |
| P99000049941 | The Killian Control of |
| (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 amendmen |
| A. If amending name, enter the new name of the corporation: | |
| J. W. Edens Holdings, Inc. | The new |
| "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or | "P.A." |
| "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | "Co". A professional corporation name must contain the |
| "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: | "Co". A professional corporation name must contain the "P.A." 4650 S. Hopkins Avenue |
| "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation B. Enter new principal office address, if applicable: (Principal office address) | "Co". A professional corporation name must contain the "P.A." 4650 S. Hopkins Avenue Titusville, FL 32780 |
| "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation 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) | "Co". A professional corporation name must contain the "P.A." 4650 S. Hopkins Avenue Titusville, FL 32780 4650 S. Hopkins Avenue Titusville, FL 32780 |
| Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation 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 were registered agent and/or the new registered office address. | "Co". A professional corporation name must contain the "P.A." 4650 S. Hopkins Avenue Titusville, FL 32780 4650 S. Hopkins Avenue Titusville, FL 32780 |
| Corp., "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation 3. 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 memorial registered agent and/or the new registered office address was a large of New Registered Agent Name of New Registered Agent J. Wayne Edens | "Co". A professional corporation name must contain the "P.A." 4650 S. Hopkins Avenue Titusville, FL 32780 4650 S. Hopkins Avenue Titusville, FL 32780 |
| "Corp." "Inc" or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation 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 registered agent and/or the new registered office address Name of New Registered Agent J. Wayne Edens 4650 S. Hopkins Avenue | "Co". A professional corporation name must contain the "P.A." 4650 S. Hopkins Avenue Titusville, FL 32780 4650 S. Hopkins Avenue Titusville, FL 32780 |
| "Corp." "Inc" or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation 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 registered agent and/or the new registered office address Name of New Registered Agent J. Wayne Edens 4650 S. Hopkins Avenue | "Co". A professional corporation name must contain the "P.A." 4650 S. Hopkins Avenue Titusville, FL 32780 4650 S. Hopkins Avenue Titusville, FL 32780 |

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Change | <u>PT</u> | John De | <u>.</u> | | | |
|----------------------------|-------------|-------------|---------------|---------------------|--|--|
| X Remove | <u>v</u> | Mike Jones | | | | |
| X Add | <u>sv</u> | Sally S | mith | | | |
| Type of Action (Check One) | Title | | Name | <u>Addres</u> s | | |
| 1) Change | VP | | David Allaire | 6943 Beargrass Road | | |
| Add | | | | Harmony, FL 34773 | | |
| X Remove | | | | | | |
| 2) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 3) Change | - | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 4) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| 5) Change | | | | | | |
| Add | | | | | | |
| Remove | | | | | | |
| | | | | | | |
| 6) Change | | _ | | | | |
| Add | | | | | | |
| Remove | | | | | | |

| Attach additi | or adding additional sheets, if nec | essary). (Be | specific) | _ _ | | | |
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| f an amendi | ment provides for | r an avchanca | raclassification | n or cancallat | ian af iccuad cha | POC | |
| provisions f | or implementing | the amendmer | nt if not contai | ned in the ame | ndment itself: | 103, | |
| (if not a | pplicable, indicate | e N/A) | | | | | |
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| The date of each amendment(s) a | doption: | , if other than the |
|--|---|---------------------------------------|
| date this document was signed. | 10015 | |
| Effective date <u>if applicable</u> : | /2015 | |
| | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this bedocument's effective date on the De | plock does not meet the applicable statutory filing requirements. epartment of State's records. | , this date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/were add by the shareholders was/were su | opted by the shareholders. The number of votes cast for the amer fficient for approval. | ndment(s) |
| | proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendment | |
| "The number of votes cast | for the amendment(s) was/were sufficient for approval | |
| by | ,, | |
| | (voting group) | |
| ☐ The amendment(s) was/were add action was not required. | opted by the board of directors without shareholder action and shareholder action | areholder |
| ☐ The amendment(s) was/were add action was not required. | opted by the incorporators without shareholder action and shareholder | older |
| Dated Nay | COMBOR & BOX | |
| (By a d | irector, president or other officer – if directors or officers have not do not be not not proportion – if in the hands of a receiver, trustee, or ot ted fiduciary by that fiduciary) | |
| | J. Wayne Edens | |
| | (Typed or printed name of person signing) | |
| | President | |
| | (Title of person signing) | |