

469080

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

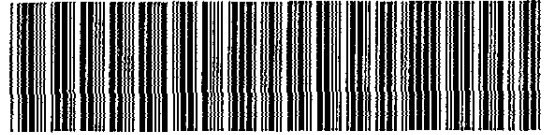
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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*Name
Change
Amend*

01/13/04--01070--003 **35.00

RECEIVED
04 JAN 13 AM 11:53
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
04 JAN 13 PM 3:55
TALLAHASSEE, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Service Insurance Agency

Signature

Requested by:

SW

1/13

Name

Date

Time

Walk-In

Will Pick Up

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☐ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☒ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval
- ☐ Courier

**ARTICLES OF AMENDMENT TO THE
ARTICLES OF INCORPORATION OF
SERVICE INSURANCE AGENCY, INC.**

FILED
04 JAN 13 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.1003 through 607.1005 of the Florida Business Corporation Act, the undersigned corporation adopts the following Articles of Amendment to its Articles of Incorporation:

1. The name of the Corporation is SERVICE INSURANCE AGENCY, INC.
2. The following Amendment to the Articles of Incorporation was adopted by all of the Directors and all of the stockholders of the Corporation eligible to vote by the execution of a written statement manifesting their intention that such amendment be adopted, dated the 9th day of January, 2004, in the manner prescribed by Section 607.1003 through 607.1006 of the Florida Business Corporation Act:

ARTICLE I

Article I of the Articles of Incorporation is amended to read as follows:

ARTICLE I

1. The name of the corporation shall be BRICKNER ENTERPRISES, INC.
2. The foregoing Amendment shall become effective and the Articles of Incorporation shall be deemed to be amended thereby upon the filing of these Articles of Amendment by the Department of State.

IN WITNESS WHEREOF, the Corporation has caused these Articles of Amendment to be executed by its President and Secretary on this 9th day of January, 2004.

BY: [Signature]
JOSEPH C. BRICKNER, President

And BY: Paula D. Brickner
PAULA D. BRICKNER, Secretary

STATE OF FLORIDA)
COUNTY OF LEE)

BEFORE ME, the undersigned authority, personally appeared JOSEPH C. BRICKNER who is the President of BRICKNER ENTERPRISES, INC. to me well known to be the person described in and who subscribed to the above Articles of Amendment to the Articles of Incorporation, and did freely and voluntarily acknowledge before me according to law that he made and subscribed the same for the use and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal, at Fort Myers, Lee County, Florida this 16 day of January, 2007.



Mary Vlasak Snell
My Commission DD210065
Expires May 23, 2007

Mary Vlasak Snell, Notary Public
My Commission Expires: _____
My Commission Number: _____

STATE OF FLORIDA)
COUNTY OF LEE)

BEFORE ME, the undersigned authority, personally appeared PAULA D. BRICKNER who is the Secretary of BRICKNER ENTERPRISES, INC. to me well known to be the person described in and who subscribed to the above Articles of Amendment to the Articles of Incorporation, and did freely and voluntarily acknowledge before me according to law that he made and subscribed the same for the use and purposes therein mentioned and set forth.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal, at Fort Myers, Lee County, Florida this 16 day of January, 2007.



Mary Vlasak Snell
My Commission DD210065
Expires May 23, 2007

Mary Vlasak Snell, Notary Public
My Commission Expires: _____
My Commission Number: _____