

540623

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

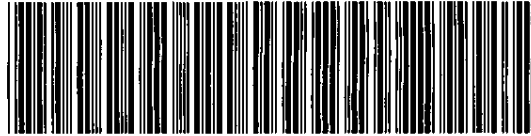
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FILED
12 MAY -7 PM 3:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 11 2012

T. ROBERTS

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CORAL SPRINGS, FL 33067
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E-mail: lgartner@fdn.com

April 26, 2012

Florida Department of State
Division of Corporations
Amendment Section
PO Box 6327
Tallahassee, FL 32314

RE: Palmetto Insurance Underwriters to Michael Pascale Holdings, Inc.

Gentlemen:

Please find a Name Change Amendment changing the name of the business from Palmetto Insurance Underwriters, Inc. to Michael Pascale Holdings, Inc.

My check in the amount of \$35.00 is enclosed for fees.

Thank you for your assistance.

Sincerely,



LEE B. GARTNER, ESQ.

LBG:js
encl.

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: PALMETTO INSURANCE UNDERWRITERS, INC.

DOCUMENT NUMBER: 540623

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL PASCALE

Name of Contact Person

Firm/ Company

8262 NORTH LAKE FOREST DRIVE

Address

DAVIE ,FL 33328

City/ State and Zip Code

MJP1117@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MICHAEL PASCALE

Name of Contact Person

at (786) 439 9665

Area Code & Daytime Telephone Number

Enclosed is a check for 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 &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

Mailing Address

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

PALMETTO INSURANCE UNDERWRITERS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

540623

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

MICHAEL PASCALE HOLDINGS, INC

The new

name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8262 N. LAKE FOREST DRIVE

DAVIE, FL 33328

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8262 N. LAKE FOREST DRIVE

DAVIE, FL 33328

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

MICHAEL PASCALE

8262 N. LAKE FOREST DRIVE

(Florida street address)

New Registered Office Address:

DAVIE

(City)

, Florida 33328

(Zip Code)

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

(Attach additional sheets, if necessary)

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.

Example:

<u>X</u> Add	<u>SV</u>	<u>Sally Smith</u>
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Address

1000

Circumstance	Percentage (%)
If someone is attacking you	85
If someone is threatening you	75
If someone is harassing you	65
If someone is insulting you	55
If someone is annoying you	45

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

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F. 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:

(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 4/26/2012

Effective date if applicable: 4/26/2012
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

- ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders 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.

Dated 4/26/2012 04/30/2012

Signature MICHAEL PASCALE

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

MICHAEL PASCALE

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)