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Amand No. 8. 16.13

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Florida Su	urplus Lines Association \\ \(\mathcal{L} \)
DOCUMENT NUMBER: 701645	
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matter	r to the following:
Mike Gabor	
	(Name of Contact Person)
Florida Surplus Lines As	sociation, NC '
	(Firm/ Company)
PO 21447	
	(Address)
St. Petersburg, FL 33742	2-1447
	(City/ State and Zip Code)
mgabor@gaborins	S.COM for future annual report notification)
For further information concerning this matter, please	call:
Mike Gabor	786 <u>924-7055</u>
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
\$35 Filing Fee \$\times \text{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 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

(Name of Corporation as currently filed				
701645				
(Document)	Number of Corporation (if known)			
cursuant to the provisions of section 617.1006, Figure mendment(s) to its Articles of Incorporation:	Florida Statutes, this <i>Florida Not Fo</i>	r Profit Corporat	ion adopts the fo	llowir
. If amending name, enter the new name of t	the corporation:			
name must be distinguishable and contain the wo 'Company" or "Co." may not be used in the na		I" or the abbrevio		The ne "Inc.
B. Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC	YE BOX)			
D. If amending the registered agent and/or re new registered agent and/or the new regist		enter the name	of the	13 题 12
Name of New Registered Agent:				- 27
New Registered Office Address:	(Florida street address)			Ų
		, Florida		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changin I hereby accept the appointment as registered ag	g Registered Agent: gent. I am familiar with and accept gent of New Registered Agent, if c		of the position.	

Page 1 of 4

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 X_Remove X_Add	PT John I V Mike S SV Sally S	lones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	PRES	FABRY, ROY V.	3350 SOUTH DIXIE HIGHWAY
Add			MIAMI, FL 33133
X Remove			
2) X Change	PRES	WOLF, IRVIN SKIP	10739 Deerwood Park Blvd
Add			Suite 200 A
Remove			Jacksonville, FL 32246
3) X Change	PE	WIRTZ, LORNA S.	635 93RD AVENUE SOUTH
Add			SAINT PETERSBURG, FL 33702
Remove			
4) X Change	TREA	O'LEARY, ERIN K.	725 Peninsular Place
Add		· -	Jacksonville, FL 32204
Remove			
5) Change	SEC	GABOR, MIKE	1511 U.S. Highway 1
X	-		Sebastian, FL 32958
Remove			
6) Change	ASST, Transurer	Duggar, Thomas E	1391 Timberlane Road
Add			Tallahassee, FL 32312
X Remove		Page 2 of 4	. —————————————————————————————————————

f amending or adding addit attach additional sheets, if ned	cessary). (Be specific)			
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	date of each amendment(s) adoption: JUIY 25, 2013 this document was signed.	_, if other than the		
	Offective date if applicable:			
	(no more than 90 days after amendment file date)			
Ada	option of Amendment(s) (CHECK ONE)			
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.			
	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.			
	Dated 8 6 20 3 Signature Mid			
	Signature Min Leave Signature			
	(By the chairman or vice chairman of the board, president or other officer-if directors			
	have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)			
	Mike Gabor			
	(Typed or printed name of person signing)			
	Secretary			
	(Title of person signing)			