H70476

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





000358990120

61/29/21--01619--003 **85.00

7

R. WHITE MAR 1 6 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: Rio Insurance Age	ney, Inc.	
DOCUMENT NU			
	les of Amendment and fee are su	ibmitted for filing.	
Please return all co	rrespondence concerning this ma	atter to the following:	
	Bertha M Diaz		
		Name of Contact Person	n
	Rion Insurance Agency, Inc.		
		Firm/ Company	
	3240 S Dixie Hwy		
	-	Address	
	West Palm Beach, FL 33405		
		City/ State and Zip Cod	e
	rio33405@att.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, pleas	se call:	
Bertha Diaz		at (377-2948
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	☐\$43,75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P	Iailing Address mendment Section division of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio The C 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303

Articles of Amendment to Articles of Incorporation of

Rio Insuance Agency, Inc. (Name of Corporation as currently filed with the Florida Dept. of State) 1170476 (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: 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) 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 in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: 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.

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 Doe	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) X Change	PVST	Bertha M. Diaz	11952 60th St N
Add			West Palm Beach, FL 33411
Remove			11952 60th St N
2) Change	VP	Bertha M Diaz	West Palm Beach, FL 33411
Add			
X Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
NOTE - When Annual Report was filed, I mistakenly listed myself twice instead of adding the correct titles under ONE entry				
Please delete second entry, and list me solely as ONE entry with the correct titles - PVST. Thank you.				
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)				
				

•	1/1/2021	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
1/ Effective date <u>if applicable:</u>	1/2021	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirement Department of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were a action was not required.	dopted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes east for the amo sufficient for approval.	endment(s)
	pproved by the shareholders through voting groups. The followin or each voting group entitled to vote separately on the amendmen	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by	***	
.,	(voting group)	
1/22/202		
Dated	·	
Signature	Beech Dear	
(By a selec	director, president or other officer – if directors or officers have r ted, by an incorporator – if in the hands of a receiver, trustee, or o nted fiduciary by that fiduciary)	
	Bertha M. Diaz	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	1-1