# 361688

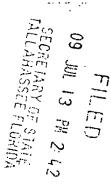
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Office Use Only



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JAK V

#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

•:

NAME OF CORPO	ORATION:Fi	rst Florida Insurers of Tam	pa, Inc.
DOCUMENT NUM	MBER:	J61688	
The enclosed Article	es of Amendment and fee a	are submitted for filing.	
Please return all cor	respondence concerning th	is matter to the following:	
-		James M. Puls  Name of Contact Person	
	Firet Flori	da Insurers of Tampa, Inc.	
<u>-</u> 	THE TOTAL	Firm/ Company	<del></del>
_	3710	0 West Azeele Street	
	<b></b>		
		Impa, Florida 33609 City/ State and Zip Code	<del></del>
	jpul E-mail address: (to be use	s@1stfla.com ed for future annual report notification)	·
For further information	tion concerning this matter,	please call:	
	ames M. Puls of Contact Person	at ( 813 ) 8 Area Code & Daytime Tel	75-8662 ephone Number
Enclosed is a check	for the following amount r	nade payable to the Florida Depart	tment 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 Ad Amendment Division of P.O. Box 63 Tallahassee.	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circl	le

Tallahassee, FL 32301

#### Articles of Amendment to Articles of Incorporation of

First Florida In	isurers of Tampa, Inc	c. <u>E</u>	15 11 -11
(Name of Corporation as curre	ently filed with the Florida	Dept. of State)	過りた
	J61688		湯 50 円
	nber of Corporation (if know	/n)	两点 某一
Pursuant to the provisions of section 607.100e amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this <i>Flo</i>	orida Profit Corporation ad	opts the following
A. If amending name, enter the new name of	f the corporation:		
			The new
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	e designation "Corp," "Inc, fessional association," or to	" or "Co". A professional	
B. Enter new principal office address, if app (Principal office address MUST BE A STREE			
(17 morphi office address <u>Proof Distribute</u>			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)			<del>-</del> -
D. If amounting the registered agent and/on-	unalistated office address in	Florida ontou the name of	f tha
D. <u>If amending the registered agent and/or new registered agent and/or the new regis</u>		riorida, enter the name of	tile
	<u>.                                      </u>		
Name of New Registered Agent:			
		<del></del>	
New Registered Office Address:	(Florida street ad	tdress)	
		, Florida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changi I hereby accept the appointment as registered a		nd accept the obligations of t	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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	Brandie Puls		
Pres	John L. Puls, Jr.		
CEO	Barry Katz	3710 West Azeele Street Tampa, Florida 33609	
	ding or adding additional Articles, en dditional sheets, if necessary). (Be sp		
<u>provisi</u>	mendment provides for an exchange, ons for implementing the amendment of applicable, indicate N/A)		
		-	

### 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
Sec + VPFInal	Kim Kirkbride NCC	3710 West Azeele Street Tampa, Florida 33609	
<u>Dir</u>	John L. Puls, Jr.	3710 West Azeele Street Tampa, Florida 33609	Ø Add □ Remove
Dir	Barry Katz	3710 West Azeele Street Tampa, Florida 33609	
	ing or adding additional Artic ditional sheets, if necessary).		
,			
•			
provisio		nange, reclassification, or cancellation of idment if not contained in the amendmen	

## 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>Dir</u>	Kim Kirkbride	3710 West Azeele Street Tampa, Florida 33609	☑ Add ☐ Remove
	ding or adding additional Artic dditional sheets, if necessary).		
,			
provisi	mendment provides for an exch ons for implementing the amen not applicable, indicate N/A)	ange, reclassification, or cancellation o dment if not contained in the amendme	f issued shares, ent itself:

The date of each amendmen	it(s) adoption: July 10, 2009
Effective date <u>if applicable</u> :	July 10, 2009 (date of adoption is required)
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
	ere approved by the shareholders through voting groups. The following statemed bed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	.,,
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_July	/ 10, 2009
Signature _	
sel	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	John L. Puls, Jr.
	(Typed or printed name of person signing)
	Director
	(Title of person signing)