## 379741

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AMD FILED



## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Frontier Action: J79741	djusters of For	t Myers, INC		
	of Amendment and fee are sub	omitted for filing.			
Please return all corres	spondence concerning this mat	ter to the following:			
	Cynthia Black				
	<u> </u>	Name of Contact Perso			
	Frontier Adjusters of Fort Myers, Inc				
		Firm/ Company			
	5919 Tropical D	rive			
		Address			
	Fort Myore El G				
	Fort Myers, FL 3				
		City/ State and Zip Coo	le		
froi	ntierflorida@eart	hlink not			
1101		ed for future annual repor	t notification)		
	12-mail address. (to be us	ed for future annual repor	t notification)		
For further information	n concerning this matter, pleas	e call:			
Cynthia Black Name of Contact Person  at (239) 936-7000 Area Code & Daytime Telephone Number					
	of Contact Person	Area Co	ode & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made p	ayable to the Florida Dep	artment 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)		
Amo Divi P.O.	ling Address endment Section sion of Corporations . Box 6327 ahassee, FL 32314	Amen Divisi Clifto	Address dment Section on of Corporations n Building Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

Frontier Adjusters of F	ort Myers, Inc.			_	
-	currently filed with the Flo	orida Dept. of State)			
J79741				_	
(Documer	nt Number of Corporation (if	known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporat	ion adopts the followin	ng amendment(s) to	)
A. If amending name, enter the new na	ime of the corporation:				
JCBLACK of Fort Mye	rs, Inc.			The new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	tain the word "corporation. ation "Corp." "Inc," or "C	lo". A professional ce	corporated" or the a proporation name must	bbreviation	
		N/A			
B. Enter new principal office address, (Principal office address MUST BE A S	if applicable: TREET ADDRESS )			_	
, 3				_	
				<del></del>	
C. Enter new mailing address, if appli	cable	N/A			
(Mailing address MAY BE A POST		IN/A		_	
				-	
				_	
D. If amending the registered agent an new registered agent and/or the new		ess in Florida, enter th	e name of the	<u> </u>	
	N/A			ALI ALI	
Name of New Registered Agent	18/74		<del></del>	JUI CRE AH	15-
				IAR:	م. حد الم. م.
	(Florida sired	et address)			后去容
New Registered Office Address:	N/A	, FI	orida		
	(City)		(Zip Code)	PH 3: 53 OF STATE EE, FLORIDA	0
New Desistand Ament's Simultons if a	hanaina Dunistanad Asanti			D	
New Registered Agent's Signature, if c I hereby accept the appointment as regist		ith and accept the oblig	gations of the position.		
••••••••••••••••••••••••••••••••••••••	-				
	anature of New Registered As	gent 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)

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	<u>PT</u>	John Doe	
X Remove	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	<del></del>		
Add Remove			
2) Change			
Add			
Remove			
3) Change			
Add Remove			
4) Change			
Add			
Remove			
5) Change Add			
Remove			
6) Change			The state of the s
Add			
Remove			

E. If amending or additional sh (Attach additional sh N/A	vets, if necessary). (B		nere.		
					. <u>-</u>
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		12.021(85,0-21-1-2			
			· · · · ·		
					······································
provisions for imp	rovides for an exchang lementing the amendm le, indicate N/A)	e, reclassification ent if not contain	n, or cancellation ned in the amend	n of issued shares, Iment itself:	
N/A			•		
· · · · · ·					
			<del></del> :-		

The date of each amendment(s) add date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
action was not required.  The amendment(s) was/were adop	ted by the board of directors without shareholder action and shareholder ted by the incorporators without shareholder action and shareholder	
action was not required.		
Dated	Mary Real	
(By a dir selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	_
	lesse L. Black	
-	(Typed or printed name of person signing)	
F	President	
_	(Title of person signing)	<u> </u>