K39956

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'APR 9 2012 T. LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION: East Coast Public Adjusters Inc.				
DOCUMENT NUMBER: K 39956				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Any Quinlan Name of Contact Person				
East Coast Public Adjusters Fine				
224 Paleyno Au				
Con Gables, FL 33134 City/ State and Zip Code				
E-mgil address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Amy Quinlan at (305) 441.0882 Name of Contact Person Area Code & Daytime Telephone Number				
Name of Contact Person Area Code & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department of State:				
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee Certificate of Status \$43.75 Filing Fee Certified Copy (Certificate of Status Certified Copy (Additional Copy is enclosed)				
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations				

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

Articles of Incorporation	
of A.A.	12 APR -6 PM 2: 14
East (past Public Adjustes, Inc.	SERBOTA ON A COLOR
(Name of Corporation as currently filed with the Florida Dept. of State)	SEGRETARY OF STATE TALLAHASSEE PLORIDA
K 39956	LOTTUA
(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the Articles of Incorporation:	ne following amendment(s) to
A. If amending name, enter the new name of the corporation:	
nla	The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation nword "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:	<u>1¢</u>
Name of New Registered Agent Susan Catania	
224 Palemo ave (Florida street address)	
New Registered Office Address: Coval Gables, Florida 33	3/34 v Code)
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the fignature of New Registered Agent, if changing	position.

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> <u>Joh</u>	nn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
_X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change Add Remove	<u>P</u>	Daniel B. Oders	224 Palermo Ave Coral Gables Fi 33/34
2) Change Add Remove	<u>P</u>	Susan M. Catania	224 Paleumo Aue Come Gables, R. 33134
3) Change Add Remove	<u> </u>		
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
nla :	
'lu	
	:
·	
f an amendment provides for an exchaprovisions for implementing the amen	ange, reclassification, or cancellation of issued shares, in the amendment itself:
(if not applicable, indicate N/A)	

The date of each amendment(s) adoption:
Effective date if applicable: (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 4818
Signature (By a director, president or other officer – if directors or officers have not been selected, by an incorporator –it in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Daniel B. Oders
(Typed or printed name of person signing)
President
(Title of person signing)