K92224

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	AATION: KIRK COLF	ORD INSURANC	E AGENCY, INC.				
DOCUMENT NUME							
The enclosed Articles	of Amendment and fee are su	bmitted for filing.					
Please return all corres	pondence concerning this ma	tter to the following:					
JEFFREY S. SELZER, ESQ.							
Name of Contact Person							
SELZER AND WEISS							
	Firm/ Company						
1515 N.E. 26TH STREET							
•		Address					
	FT. LAUDERDAL	E FL 33305					
		City/ State and Zip Code	e				
JS	@SELZERANDW	EISS.COM					
55(_	sed for future annual report	notification)				
	(F	,				
For further information	concerning this matter, pleas	se call:					
JEFFREY S.	SELZER, ESQ.	at (954	, 567-4444				
Name o	of Contact Person		de & Daytime Telephone Number				
Enclosed is a check for the following amount made payable to the Florida Department 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 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					
Amendment Section Division of Corporations P.O. Box 6327		Amendment Section Division of Corporations Clifton Building					

Articles of Amendment to Articles of Incorporation of

KIRK COLFORD INSURANCE AGENCY, INC.

NIRK COLFORD INSURANCE AGENCT, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)
K92224
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
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:
new registered agent and/or the new registered office address: Name of New Registered Agent JEFFREY S. SELZER, ESQ.
Name of New Registered Agent
1515 N.E 26TH STREET
(Florida street address)
New Registered Office Address: FT. LAUDERDALE, FL., Florida 33305
(City) (Zip Code)
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.
<i>UIN MM VI /</i>
Signature of New Registered Agent, if changing
(/ * //
V //

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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	KIRK T. COLFORD	531E COMMERICAL BLVD
Add			FTLAUDERDALE FL33334
Remove			
2) Change	<u>P</u>	KRISTIN COLFORD,P.R	531E COMMERICAL BLVD
Add			FTLAUDERDALE FL33334
Remove			
3) Change			
Add			
Remove			
4) Change			
Add 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)					
Changes should be noted in the following manner;					
KIRK T. COLFORD,P AS A REMOVE					
KRISTIN COLFORD PERSONAL REP. AS AN ADD.					
F. 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)					
N/A					

The date of each amendment(s) adoption:date this document was signed.	, if other than th
Effective date if applicable: APRIL 15, 2014	
(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 very by the shareholders was/were sufficient for approval.	votes cast for the amendment(s)
The amendment(s) was/were approved by the shareholders through voting a must be separately provided for each voting group entitled to vote separate	
"The number of votes cast for the amendment(s) was/were sufficient if	for approval
by	,,
(voting group)	
The amendment(s) was/were adopted by the board of directors without shar action was not required.	reholder action and shareholder
The amendment(s) was/were adopted by the incorporators without sharehol action was not required.	der action and shareholder
Signature (By a director, presiden) or other officer – if director	tors or officers have not been
selected, by an incorporator – if in the hands of a appointed fiduciary by that fiduciary)	
KRISTIN COLFORD PERSONA	AL REP.
(Typed or printed name	of person signing)
PRESIDENT	
(Title of person	signing)