## K99045

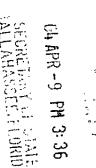
(Re	equestor's Name)			
(Ad	dress)			
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(Cit	ry/State/Zip/Phone	· #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
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## TRANSMITTAL LETTER

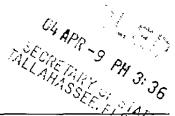
**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: CHAN	GE THE CORPORATION'S NA	ME	·
DOCUMENT NU	MBER:		
The enclosed Artic	cles of Amendment and fee ar	re submitted for filing.	
Please return all co	orrespondence concerning this	s matter to the following:	
JEA	N E RAYMOND		
	(Nai	me of Person)	
RAY	MOND INSURANCE AGENCY,		
	(Name o	f Firm/ Company)	
600	N. CONGRESS AVE #130	(Address)	
		(Address)	
DEL	RAY BCH, FL 33445		
	(City/ St.	ate/ and Zip Code)	
For further inform	ation concerning this matter,	please call:	
JEAN E RAYMONE	)	at (_561) 278-5855	
	(Name of Person)	(Area Code & Daytime	Telephone Number)
Enclosed is a chec	k for the following amount:		
□ \$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 A Amendme Division o P.O. Box	nt Section f Corporations	Street Address Amendment Section Division of Corporations 409 E. Gaines Street	

Tallahassee, FL 32399

## Articles of Amendment to Articles of Incorporation of



Raymond Insurance Agency, Inc.

(Name of corporation as currently filed with the Florida Dept. of State)

K 99 0 45
(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:

(must conta	e Agency & Financial in the word "corporation	on," "company," or	"incorporated" or	the abbreviation '	'Corp.," "Inc.," or "	Co.
AMENDA	IENTS ADOPTED	<u>)</u> - (OTHER TI	IAN NAME C	HANGE) Indic	ate Article Num	ıber
and/or Art	cle Title(s) being ar	nended, added	or deleted: (BE	SPECIFIC		
				<u> </u>		
		- <del></del>				
			<u> </u>			
					<del>-</del>	
			·			
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				···		
		(Attach add	litional pages if ne	cessary)		
10.			: <i>c</i> ::	11 6 .		
for implem	dment provides for enting the amendme	exchange, recia	issification, or (	cancellation of t	ssued snares, pro	OVIS dica:
ioi impicii	citing the amendin	ent il not coma	med in the affic	nameni itseri. (i	i not applicable, inc	uica
<del></del>		<del>- ::</del>				

(continued)

The date of each amendment(s) adoption: 04/06/2004	
Effective date if applicable: 4/06/2004	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were approved by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	r
☐ 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.	эn
☑ The amendment(s) was/were adopted by the incorporators without shareholder action as shareholder action was not required.	ıd
Signed this 06 day of April , 2004  Signature  By a director, president of officer - if directors or officers have not been selected, by an inconfortor - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  JEAN E RAYMOND  (Typed or printed name of person signing)	
President	
(Title of person signing)	

**FILING FEE: \$35**