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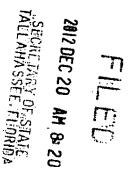
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J. SAULSBERRY EXAMINER

DEC 27 2012

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

Florida Strategic Insurance, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffry E. Baughman, Esq.

Name of Person

Spartan Law Group

Firm/Company

13575 58th Street North, Suite 151

Address

Clearwater, Florida 33760

City/State and Zip Code

chrisw@flstrategic.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffry E. Baughman, Esq.

727, 772-7826

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

## MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 323017

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Florida Strategic Insurance, LLC			
( <u>Name of the Limited Liabi</u> (A Floric	lity Company as it now appears of da Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited Liability Florida document number	y Company were filed on Dece	mber 21, 2011 and assigned	
This amendment is submitted to amend the following	;		
A. If amending name, enter the new name of the l	imited liability company here:		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company	"the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:		. ,	
(Principal office address MUST BE A STREET AD	DRESS)	2012 TALL	
		C 20	
Enter new mailing address, if applicable:	<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)		39 3	
		S <b>9</b>	
		20 10 M	
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		r records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:			
Ten registere of the readers.	Enter Florida street address		
_		, Florida	
<del></del>	City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Chistopher Weaver	4551 Mainlands Blvd	Add
		Suite D	Remove
		Pinellas Park, FL 33782	·- <del></del>
MGR	David Rano	4551 Mainlands Blvd.	Add
		Suite D	Remove
		Pinellas Park, FL 33782	_
MGR	Michael Puffer	4551 Mainlands Blvd.	Add
		Suite D	Remove
		Pinellas Park, FL 33782	<u>)                                    </u>
		ALLAHASSE	Add Topic Remove
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			Remove
			Add
			Remove

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)  The Articles of Organization are amended to add Article VII which states "The LLC shall be
	manager-managed." All other articles remain in full force and effect.
•	
,	
oated D	ecember 18, 2012 2012
	Olista Wyan
	Signature of a member or authorized representative of a member
	Christopher Weaver
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00