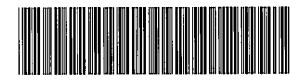
## 165789

(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: INSURE-WISE AC	GENCY 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:		
	THOMAS LLOYD-JONES			
		Name of Contact Persor	1	
	INSURE-WISE AGENCY IN	∛C.		
•		Firm/ Company		
	12040 S JOG RD STE 12			
	,	Address	• • • • • • • • • • • • • • • • • • • •	
	BOYNTON BEACH FL 334	37		
	<del></del>	City/ State and Zip Code		
TLJ@	INSUREWISE.NET			
		sed for future annual report	notification)	
For further information	concerning this matter, pleas	se call:		
THOMAS LLOYD-JO	HOMAS LLOYD-JONES at () 732-4959			
Name o	f Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:	
S35 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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

## Articles of Amendment to Articles of Incorporation of

INSURE-WISE AGENCY INC.

(Name of Corporation as curren	tly filed with the Florida Dept. of State)
1.65789	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	
	_
	——————————————————————————————————————
C. Enter new mailing address, if applicable:	三 三 三 三 三 三 二 二 三 三 二 二 二 二 二 二 二 二 二 二
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	
	P P D
D 16 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0,7
D. If amending the registered agent and/or registered office ad- new registered agent and/or the new registered office address	
Name of New Registered Agent	
Sana of New Negastrea Agen	
(Florida s	treet address)
New Registered Office Address:	, Florida (City (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familian	with and accept the obligations of the position.
Signature of New	Registered Agent, 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)

Example:

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.

X Change	$\overline{\text{b.t.}}$	John Doe				
X Remove	$\underline{\mathbf{V}}$	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s			
1) Change	D	GREGORY PRINCE	12705 HITCHCOCK CT			
X Add			RESTON VA 20191			
Remove						
2) Change						
Add						
Remove 3 ) Change						
Add						
Remove						
4) Change		_	<u></u>			
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

amending or adding a stach additional sheets.	if necessary).	(Be specific)	,	•			
					<del></del>		
						<del></del>	<del></del>
<del> </del>						•	<del></del>
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						·	
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an amendment provid	les for an exch	ange, reclass	ification, or	cancellation o	of issued shar	es.	
<u>rovisions for impleme</u>	nting the amer	n <u>dm</u> ent if not	contained i	n the amendr	nent itself:		
(if not applicable, in	aicaie N/A)						
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- 1/4/2020
The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
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) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.
☐ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
Dated 1/4/2020
Signature (By a director, president or other officer – if directors or officers have not been
selected, by an incorporator ~ if in the hands of a receiver, trustee, or other court
appointed fiduciary by that fiduciary)
THOMAS LLOYD-JONES
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)