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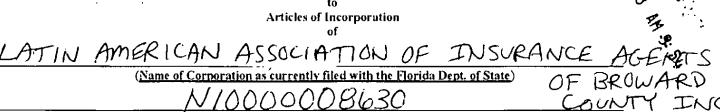
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: LATIN AMERICAN ASSOCIATION OF
DOCUMENT NUMBER: N1000008630 INSURANCE AGENTS OF
The enclosed Articles of Amendment and see are submitted for filing. BROWARD COUNTY
Please return all correspondence concerning this matter to the following:
RICHARD GIBBS
(Name of Contact Person)
BLAAIA C/O RICK GIBBS, P.A.
(Firm/ Company)
1000 SOUTH SR 7
Plantation, FL 33317 & City/State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Rick Gbbs at 954-581-7740 (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 S43.75 Filing Fee & S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status (Additional copy is enclosed) Certified Copy (Additional Copy is Enclosed)
Mailing Address Street Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to



(Document Number of Corporation (if known)

amendment(s) to 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" or "incorporated" or the abbreviation "Corp," or "Inc." "Company" or "Co." may not be used in the name.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 1000 500TH SR 7
Plantation, FZ 33317
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) BLAAIA
Same <u>P.O. BOX 17093</u> <u>Plantation, F2 333</u> 18
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:
Name of New Registered Agent: Richard D. Gibbs, III
New Registered Office Address: [U00 SOUTH SR 7 Plantation Florida 33317 (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. Signature of New Registered Agent, if changing
Treasurer

Page 1 of 4

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.

Mike Jones, V as Remo	ove, and Sally Sn	nith, SV as an Add.			
Example: X Change X Remove X Add	\underline{V} Mi	nn Doe ke Jones lly Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address	
1)Change	T Treas		RICHAR	D PO Bo Planta	
Remove 2) Change	S	SHEPH	ERD, AN	JGELA	<u>3318</u> <u>PO B</u> OX
Add Remove	_	etary	,	Planta	17093 tion, FL
3)	<u>chan</u> to i	ge SCOTT	CYNTr Sident	PO BOX	33318 33318
Remove 4) Change Add	<u>S</u>	DUNHA	tm, CHRIS	,	tion, 12 33316
Remove	ρ	LEUTS	RORTA	Plantat 1 Do Ro	
5) Change Add Remove	Past	-Presiden	+	Plantar	12093 Hon, Fr 33318
6) Change			GA, LUIS	∵ ∕	<u>× 1</u> 7093 Hon, FL
Add Remove		President President	•		33318
	NON	olect	-		



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(Attach additional sheets, if necessary)

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Example: X.Change X.Remove X.Add	PT John Do V Mike Jo SV Sally Sn	nes	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	T	GRACE, KARL	POBOX 17093 Plantation, FZ
Remove	,		33 <u>3</u> 18
2) Add	fresident Elect	BARROS, DANIEL President Elect	Plantation, Fi
Remove			3331E
3) Change	Vice		Plantation, Fr
Remove			<u>33318</u>
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change			
Add			
Remove			

f amending or adding attach additional sheets	if necessary). (Be	specific)	 -		
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(Typed or printed name of person signing)

(By the chairman or vice chairman of the board, president or other officer-if directors

(Title of person signing