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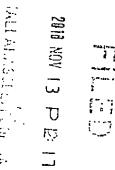
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COVER LETTER

TO: Amendment Section **Division of Corporations**

NAME OF CORPOR	RATION: Louis T. Acernese	Agency, Inc.	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Louis Acernese		
	.	Name of Contact Perso	n
	Louis T. Acernese Agency, I	ne	
		Firm/ Company	
	1761 W Hillsboro Blvd #102		
		Address	
	Deerfield Beach, FL 33442		
		City/ State and Zip Cod	e
LouA	cernesc@allstate.com		
	-	sed for future annual report	notification)
For further information	a concerning this matter, pleas	se call: 954	428-4354
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	r 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)
Ame Divi P.O.	ling Address Indment Section Ission of Corporations Box 6327 Ishassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation of

Louis T. Acernese Agency, Inc.

Louis 1. Acemese Agency, me.	
(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P00000032527	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporatio	<u>n:</u>
N/A	The new
name must be distinguishable and contain the word "corpo "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," word "chartered," "professional association," or the abbrevial	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
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: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ade	
Name of New Registered Agent N/A	
(Flori	da street address)
New Registered Office Address:	Florida
<u>New Registered Agent's Signature, if changing Registered A</u>	(City) (Zip Code)
I hereby accept the appointment as registered agent. I am fami	liar with and accept the obligations of the position.
Signature of N	lew 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)

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>	<u>Name</u>	<u>Addres</u> s
1) Change	T	James Acernese	21582 Town Place Drive
X Add			Boca Raton, FL 33433
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amending or adding additional Articles, enter change(s) here:</u> (Attach additional sheets, if necessary). (Be specific)	
N/A	
	•
F. Han 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 oth
Effective date <u>if applicable</u> : (no more than 90 days after	er amendment file date)
Note: If the date inserted in this block does not meet the applicable statu document's effective date on the Department of State's records.	tory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number o by the shareholders was/were sufficient for approval.	f votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting must be separately provided for each voting group entitled to vote separately.	
"The number of votes cast for the amendment(s) was/were sufficien	it for approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shaction was not required.	nareholder action and shareholder
■ The amendment(s) was/were adopted by the incorporators without shareh action was not required.	older action and shareholder
11/08/2018	
Signature Land	
(By a director, president or other officer – if director, by an incorporator – if in the hands of appointed fiduciary by that fiduciary)	
Louis Acernese	
(Typed or printed name of po	erson signing)
Director	
(Title of person s	igning)