## P01000031290

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## **COVER LETTER**

**TO:** Amendment Section • Division of Corporations

NAME OF CORPORATION: TAMMY S. FULLERTON INSURANCE, INC				
DOCUMEN'	T NUMBER: P01000031290		_·	
The enclosed	Articles of Amendment and fee are	e submitted for filing.		
Please return	all correspondence concerning this	matter to the following:		
	TAMMY FULLERTON			
	(Name of	Contact Person)		
	TAMMY FULLERTON INSURANCE,	INC		
	(Firm	d Company)		
	922 HWY 19 SOUTH		,	
	(,	Address)		
	PALATKA, FLORIDA 32177			
	(City/ Sta	te/ and Zip Code)	<del></del> .	
For further in	formation concerning this matter, p	lease call:		
LISA WIGGINS		at (386 ) 328-4164		
(Name of Contact Person)		(Area Code & Daytime	Telephone Number)	
Enclosed is a	check for the following amount:			
☑ \$35 Filing Fo	ee	☐ \$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 Corporation 409 E. Gaines Stree Tallahassee, FL 32	rations et	

## Articles of Amendment to Articles of Incorporation of

(Name of corporation as curre	ntly filed with the Florida Den	t. of State)	<u> </u>
(, land of dolps and a surre	,	LAIT	品声
P01000031290	· =		爱二
(Document numb	er of corporation (if known)		开公 圣
	Planta Cantaga Abia Eff	wide Dung Ge Comm	Fig. W
ursuant to the provisions of section 607.1006, dopts the following amendment(s) to its Article		riuu Projii Corpe	oration S
sopis the following unenament(s) to its rivers	os or moorporamom		
IEW CORPORATE NAME (if changing):			
FULLERTON INSURANCE AGENCY, INC			
Must contain the word "corporation," "company," or "ir	comorated" or the abbreviation	n "Corp.," "Inc.," or	"Co.")
A professional corporation must contain the word "char			
ASSESSMENT AND THE CONTROL OF THE THE	A NI NI ABAR CITANICIPA I	udianta Autiala Ni	(h.o.w(o)
MENDMENTS ADOPTED - (OTHER THAT and/or Article Title(s) being amended, added on			umber(s)
nd/or Article Title(s) being amended, added of	deleted. (DE STECIFIC	,	
	<u>.                                    </u>	<del> </del>	
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(Attach addit	ional pages if necessary)		
f an amendment provides for exchange, reclass	sification or cancellation	of issued chares	nrovisions
or implementing the amendment if not contain	ed in the amendment itse	If: (if not applicable	provisions i, indicate N/A
or mile amountained are any amount in mor positioning		( <b>v</b> gg	,

(continued)

The date of each amendment(s) adoption: 04/01/2005
Effective date if applicable: 04/01/2005
(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.
☐ 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.
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Signed this 31ST day of MAY 2005
Signature Julieta
(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)
TAMMY FULLERTON
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)

FILING FEE: \$35