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01 DEC 19 PM 11
STATE OF FLORIDA
SECRETARY OF STATE

ACCOUNT NO. : 0721000000

REFERENCE : 448936 7199111

AUTHORIZATION :

Patricia Pigute

COST LIMIT : \$ 43.75

ORDER DATE : December 19, 2001

ORDER TIME : 11:52 AM

ORDER NO. : 448936-015

CUSTOMER NO: 7199111

CUSTOMER: Seth E. Ellis, Esq
The Law Offices Of Seth E.
Suite 290
2600 North Military Trail
Boca Raton, FL 33433

Name
Change
Amend

300004732763--7

DOMESTIC AMENDMENT FILING

NAME: OSHINS INSURANCE & FINANCIAL
SERVICES, INC.

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Deborah Schroder -- EXT# 1118

EXAMINER'S INITIALS:

12/19/01

RECEIVED
01 DEC 19 PM 12:11
DIVISION OF CORPORATION

ARTICLES OF AMENDMENT
TO
ARTICLES OF INCORPORATION
OF
OSHINS INSURANCE & FINANCIAL SERVICES, INC.

Pursuant to the provisions of Florida law, the undersigned Corporation adopts the following Articles of Amendment to its Articles of Incorporation.

1. The name of the Corporation is **OSHINS INSURANCE & FINANCIAL SERVICES, INC.**
2. The following Amendment of the Articles of Incorporation was adopted by the Incorporator of the Corporation on the 18 th day of December 2001, in the manner prescribed by Florida law.

ARTICLE I
Name

The name of the corporation is **MOSHINS, INC.**

3. The above amendment was adopted by the incorporator without shareholder action and no shareholder action was not required.
4. This Amendment shall become effective immediately upon filing with the Department of State of Florida.

DATED this 18 day of December, 2001

**OSHINS INSURANCE & FINANCIAL
SERVICES, INC.**

By: 

Seth E. Ellis, Incorporator

STATE OF FLORIDA:

SS:

COUNTY OF PALM BEACH:

The foregoing instrument was acknowledged before me this 18 day of December, 2001, by Seth E. Ellis, as the Incorporator of **OSHINS INSURANCE & FINANCIAL SERVICES, INC.**, a Florida corporation, by and on behalf of the Corporation. He is personally known to me or has produced _____ as identification.



LaShon Houston
Commission # DD 031033
Expires June 4, 2005
Bonded Thru
Atlantic Bonding Co., Inc.


Notary Public, State of Florida at Large

LASHON K. HOUSTON

Type/Print/or Stamp Name of Notary Public

My Commission Expires:

June 4, 2005