

# FD2000008095

Florida Department of State  
Division of Corporations  
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((H10000265656 3)))



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To: Division of Corporations  
Fax Number : (850) 617-6380

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
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10 DEC 10 PM 3:16  
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COR AMND/RESTATE/CORRECT OR O/D RESIGN  
ALLCOAST INSURANCE CORPORATION

Certificate of Status	0
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*Amens*

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment  
to  
Articles of Incorporation  
of

ALLCOAST INSURANCE CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P02000008095

(Document Number of Corporation (if known))

FILED  
H10000265656 3

10 DEC 10 PM 3:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following 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," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."*

**B. Enter new principal office address, if applicable:**

(Principal office address **MUST BE A STREET ADDRESS**)

6741 WEST 4TH AVE

HIALEAH FL 33012

**C. Enter new mailing address, if applicable:**

(Mailing address **MAY BE A POST OFFICE BOX**)

6741 WEST 4TH AVE

HIALEAH FL 33012

**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:

MIRNA GONZALEZ

New Registered Office Address:

6741 WEST 4TH AVE

(Florida street address)

HIALEAH

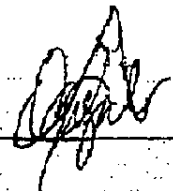
(City)

, Florida 33012

(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

**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:** H10000265656 3  
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>P</u>	<u>DAMARYS LUGO</u>	<u>6741 WEST 4TH AVE</u> <u>HIALEAH FL 33012</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>P</u>	<u>MIRNA GONZALEZ</u>	<u>6741 WEST 4TH AVE</u> <u>HIALEAH FL 33012</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

**E. If amending or adding additional Articles, enter change(s) here:**  
(attach additional sheets, if necessary). (Be specific)

**F. If an 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)

The date of each amendment(s) adoption: 12/10/2010

(date of adoption is required)

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Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

## 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 \_\_\_\_\_."

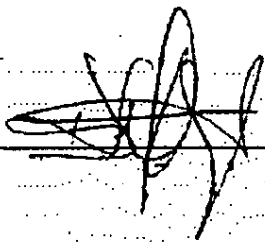
(voting group)

☐ The amendment(s) 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.

Dated 12/10/2010

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)

DAMARYS LUGO, PRESIDENT

(Typed or printed name of person signing &amp; Title of person signing)