P0200018017

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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05/19/14--01005--025 **35.00



6/2/14

COVER LETTER

TO: Amendment Section Division of Corporations

	Banesco BER: P02000018		okers, Inc.
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Susana Martin	ez	
•	·	Name of Contact Person	1
	Banesco Insur	ance Brokers,	Inc.
	•	Firm/ Company	
	10201 NW 58t	h Street, Suite	e 302
		Address	
	Doral, FL 3317	'8	
•		City/ State and Zip Cod	e
sm	artinez@banes	scoib com	
		sed for future annual report	notification)
		·	
For further information	concerning this matter, pleas	se call:	
Susana Ma	rtinez	_{at (} 954	, 938-3510
Name o	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐S43.75 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 ndment Section sion of Corporations Box 6327 thassee, FL 32314	Amend Division Clifton 2661 I	Address Iment Section on of Corporations Building xecutive Center Circle assec, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

2814 HAY 19 PM 3:31

Banesco Insurance Brokers, Inc.

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

P02000018017

19

(Document Number of Corporation (if known)

ndment(s) to

If amending name, enter the new name of t	the corporation:	The
une must be distinguishable and contain the Corp.," "Inc.," or Co.," or the designation " ord "chartered," "professional association," o	'Corp," "Inc," or "Co". A profes.	" or "incorporated" or the abbre sional corporation name must conto
Enter new principal office address, if appli Principal office address <u>MUST BE A STREET</u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC.	<u></u>	·
. If amending the registered agent and/or re new registered agent and/or the new regist		enter the name of the
	tered office address:	
new registered agent and/or the new regist	tered office address:	
new registered agent and/or the new regist	tered office address: (Florida street address)	

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	D	_	Jaime Jean Francois	10201 NW 58th Street
Add				Suite 302
Remove				Doral, FL 33178
2) Change		_		
Add				
Remove				
3) Change		<u> </u>	Man 1	
Add				
Remove				
4) Change		_		
Add				
Remove				·
5) Change				
Add				
Remove				
6) Change				
Add	 			
Remove				
L Kelliove				

	or adding additional and sheets, if necessar	ry). (Re specific)			
-			-11-1-11-11-11		
	***************************************		•		
					
	·				
		· · · · · · · · · · · · · · · · · · ·			
an amendn	ent provides for an e	exchange, reclassi	fication, or cancel	lation of issued sha	res,
rovisions fo	r implementing the a	mendment if not	contained in the a	mendment itself:	
(ij noi aj	plicable, indicate N/A	.)			

The date of each amendment(s)	adoption: February 17th, 2014	
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were n by the shareholders was/were	dopted by the shareholders. The number of votes east for the unendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
hy	(voting group)	
·	(voting group)	
The amendment(s) was/were ad action was not required.	dopted by the board of directors without shareholder action and shareholder	
The uniendment(s) was/were no settion was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated 05/12/2	Yarw Stile S	
select	director, president of other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court need fiductory by that fiductory)	_
	Maria Alejandra Yepez	
	(Typed or printed name of person signing)	
	Secretary	
	(Title of person signing)	