

PA00000410977

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

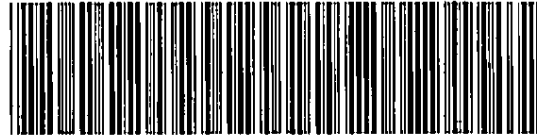
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

FLORIDA HEALTH PROFESSIONALS LEGAL EXPENSE
NAME OF CORPORATION: INSURANCE, INC.

DOCUMENT NUMBER: P02000040977

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

W. Shane Hunt
Name of Contact Person

FLORIDA HEALTH PROFESSIONALS LEGAL EXPENSE INSURANCE, INC.
Firm/ Company

238 Ponte Vedra Park Dr. Suite 103
Address

Ponte Vedra Beach, FL 32082
City/ State and Zip Code

corporate@fhplei.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

W. Shane Hunt at (904) 262-6556
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input checked="" type="checkbox"/> \$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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FLORIDA HEALTH PROFESSIONALS LEGAL EXPENSE INSURANCE, INC.
(Name of Corporation as currently filed with the Florida Dept. of State)

P02000040977
(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this corporation adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

N/A

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)

238 Ponte Vedra Park Dr.
Suite 103
Ponte Vedra Beach, FL 32082

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

238 Ponte Vedra Park Dr.
Suite 103
Ponte Vedra Beach, FL 32082

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 C. Randal Fairbanks
113 Nature Walk Parkway, Suite 103
(Florida street address)

New Registered Office Address: St. Augustine, Florida 32092
(City) (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.

Randal C. Fairbanks
Signature of New Registered Agent, if changing

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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:

Change PT John Doe

Remove V Mike Jones

Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>S</u>	<u>Huseman, Kristine L.</u>	<u>9310 Old Kings Rd. South</u> <u>Suite 701</u> <u>Jacksonville, FL 32257</u>
2) <input type="checkbox"/> Change <input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove	<u>D CEO</u>	<u>Huseman, William R.</u>	<u>9310 Old Kings Rd. South</u> <u>Suite 701</u> <u>Jacksonville, FL 32257</u>
3) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DS</u>	<u>Hunt, W. Shane</u>	<u>238 Ponte Vedra Park Dr.</u> <u>Suite 103</u> <u>Ponte Vedra Beach, FL 32082</u>
4) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DP</u>	<u>Crenshaw III, McCarthy</u>	<u>238 Ponte Vedra Park Dr.</u> <u>Suite 103</u> <u>Ponte Vedra Beach, FL 32082</u>
5) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove	<u>DV</u>	<u>Fairbanks, C. Randal</u>	<u>238 Ponte Vedra Park Dr.</u> <u>Suite 103</u> <u>Ponte Vedra Beach, FL 32082</u>
6) <input type="checkbox"/> Change <input type="checkbox"/> Add <input type="checkbox"/> Remove	_____	_____	_____

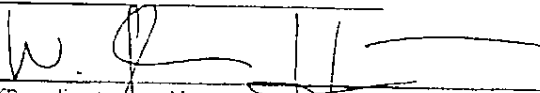
The date of each amendment(s) adoption: _____, if other than the date this document was signed.

Effective date if applicable: September 19, 2018
(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 September 19, 2018

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)

W. Shane Hunt

(Typed or printed name of person signing)

Secretary

(Title of person signing)