Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: ELIZABETH BELLO P.A.

Account Number : I20110000066 Phone

(305)764-3800

Fax Number

(305)764-3801

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

## COR AMND/RESTATE/CORRECT OR O/D RESIGN RESIDENTIAL INSURANCE, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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Corporate Filing Menu

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T. BROWN

https://efile.sunbiz.org/scripts/efilcovr.exe

7/30/2012

TO: Amendment Sect Division of Corpo		,	
¥	RATION: Residential	Insurance Inc	
NAME OF CORPOR	RATION: TOUSING HIGH	nour direct, inc.	
DOCUMENT NUM	BER: P02000101172	<u></u>	<u> </u>
The enclosed Articles	of Amendment and fee are sul	omitted for filing.	
Please return all corre	spondence concerning this mat	ter to the following:	
	Elizabeth Bello		
		Name of Contact Perso	n
	Elizabeth Bello, P.		
	4400144 + 00.00	Firm/ Company	
	1420 West 68 Stre		<u></u>
	Hialeah FL 33014	Address  -	
		City/ State and Zip Cod	c
chr	istina@belloinsura	nce.net	
		ed for future annual report	notification)
	·		
For further informatio	n concerning this matter, pleas	e call:	
Christina Mar	rtinez	at (305	ode & Daytime Telephone Number
Name	of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Dep	ariment of State:
S35 Filing Fee	□\$43.75 Filing Fcc & 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)
Am Div P.O	Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		dment Section on of Corporations n Building Executive Center Circle

Articles of Amendment to Articles of Incorporation of

of
Residential Insurance, Inc.
(Name of Corporation as currently filed with the Florida Dept. of State)
P02000101172
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendmits Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
Bello Insurance, Inc.
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio  "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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered office address:
Name of New Registered Agent
(Florida street address)
New Registered Office Address:
(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.  Signature of New Registered Agent, If changing
Signature of New Registered Agent, if Changing

5) \_\_\_\_ Change

6) \_\_\_\_ Change

\_ Add

\_Remove

\_\_\_ Add

\_\_ Remove

P = President; V = Vice I Executive Officer: CFO = held. President. Treasures Changes should be noted	if necess rector title President = Chief F r. Directo in the foliones	ary)  e by the first letter of the office title: ; T= Treasurer; S= Secretary; D= Director; TR= Tinancial Officer. If an officer/director holds more or would be PTD.  flowing manner. Currently John Doe is listed as the orporation. Sally Smith is named the V and S. These	than one title, list the first letter of each office  PST and Mike Jones is listed as the V. There is
X Change	PT	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
l)Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			<del></del>
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Remove			
4) Change			
Add			***************************************
Remove			

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)	amending or adding additional Art tach additional sheets, if necessary).	(Be specific)				
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The date of each amendment(s) adoption:
Effective date if applicable: 25 of date of Bling
(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'"
(voling 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
Signature Rhydro Mortine
(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)
appointed inductary by that inductary)
Christina Martinez
(Typed or printed name of person signing)
γ. θ.
(Title of person signing)