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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: ROYAL	PRESTIGE INSURANCE AGENCY, INC	
DOCUMENT NUMBER: P0200011442	0	
The enclosed Articles of Amendment and f		
The onological meters by American and I	ce are submitted for filling.	
Please return all correspondence concerning	g this matter to the following:	
ARIEL RODRIGUEZ		
(Na	ame of Contact Person)	
ROYAL PRESTIGE INS	URANCE AGENCY, INC	
(Firm/ Company)		
0005 MEOT 40TH AVENU		
3825 WEST 16TH AVENUE # 1 (Address)		
	(100100)	
HIALEAH, FLORIDA 33012	·	
(Ci	ty/ State and Zip Code)	
For further information concerning this mat	ter, please call:	
ARIEL RODRIGUEZ	at ( 305 ) 512-8806	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount	nt:	
□\$35 Filing Fee ✓\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is enclosed) 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

## ROYAL PRESTIGE INSURANCE AGENCY, INC

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

(Document number of corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
NEW CORPORATE NAME (if changing):
NOT APPLICABLE
(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.") (A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)
RESIGNATION OF OFFICER: MABEL DIAZ
NEW OFFICER: YAIMA DELGADO 328 WEST 18TH STREET
HIALEAH, FLORIDA 33010
SSEE
NEW REGISTERED AGENT: ARIEL RODRIGUEZ ( See als authorist Ex A)
(Attach additional pages if necessary)
If an amendment provides for 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)
STOCK DISTRIBUTION:
ARIEL RODRIGUEZ 50% SHARES
YAIMA DELGADO 50% SHARES
(continued)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR RE FOR CORPORATIONS	GISTERED AGENT OR BOTH
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 61 statement of change is submitted for a corporation organized under the law in order to change its registered office or registered agent, or both	s of the State of FLORIDA
1. The name of the corporation: ROYAL PRESTIGE INSURANCE AGENC	Y, INC
2. The principal office address: 3825 WEST 16TH AVENUE # 1	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 10/23/02 Document n	umber: P02000114420
5. The name and street address of the current registered agent and registered Florida Department of State:	office on file with the
MABEL DIAZ	
3825 WEST 16TH AVENUE # 1	
HIALEAH, FLORIDA 33012	
6. The name and street address of the new registered agent (if changed) and (if changed):	/or registered office
ARIEL RODRIGUEZ	
3825 WEST 16TH AVENUE # 1	
(P.O. Box NOT acceptable) HIALEAH, FLORIDA 33012	
The street address of its registered office and the street address of the bus as changed will be identical.	siness office of its registered agent,
Such change was authorized by resolution duly adopted by its board of authorized by the board of the corporation has been notified in writing of	lirectors or by an officer so f the change.
	IGUEZ - PRESIDENT
I hereby accept the appointment as registered agent and agree to act in I further agree to comply with the provisions of all statutes relative to the of my duties, and I am familiar with and accept the obligation of my post document is being filed merely to reflect a change in the registered office corporation has been notified in writing of this change.	this capacity.
02/01/07	
(Signature of Registered Agent)	(Date)
If signing on behalf of an entity:	
(Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*

The date of each amendment(s) adoption: 02/01/07
Effective date if applicable: 02/01/07
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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.
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)
PRESIDENT (Typed or printed name of person signing)
ARIEL RODRIGUEZ
(Title of person signing)