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Office Use Only



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FILED
2011 DEC 22 PH 12: 27
SECRETARY OF STATE TALL AHASSEE FLORID

12/28/ n

COVER LETTER

NAME OF CORPORATION: AD VOCATE CLAIM SERVICE, TWO

DOCUMENT NUMBER: PO 2000115375

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

Please return all correspondence concerning this matter to the following:

Steven Venale
Name of Contact Person
Advocate Claim Service, Tvc.

Firm/Company

4386 N. (arambola Circle
Address

Coconut Creck Fl 33065

City/ State and Zip Code

INFO D Advocate Claims com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven Venale
Name of Contact Person

at (954) 978-0886

Area Code & Daytime Telephone Number

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

Mailing Address

2 \$35 Filing Fee

TO: Amendment Section

Division of Corporations

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

□\$43.75 Filing Fee &

Certificate of Status

enclosed)

Street Address

(Additional Copy

□\$43.75 Filing Fee &

(Additional copy is

Certified Copy

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

□\$52.50 Filing Fee

is enclosed)

Certificate of Status Certified Copy

, Article	es of Amendment , FILED
4	of Incorporation of 2011 DEC 22 PM 12: 27
(Name of Corporation as currently filed with	the Florida Dept. of State AHASSEE, FLORID
802000115375	the second seconds
(Document Number of Corpora	
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	on:
	oration," "company," is "incorporated" or the abbreviation or "Co". A professional corporation name must contain the ation "P.A."
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	Coconut Creek, Fl 33065
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	4386 N. rarandola Ciah Coconut crech Florida 33065
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
Name of New Registered Agent	
(Flor	ida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	
Signature of New Regist	tered Agent, if changing

E. If amending v. vog additional Articles, enter change(s) here: (attach additional Leets, if necessary). (Be specific)	
Name Charge from Advocate Claim Service To Advocate Claims Bublic Adjusters, Inc.	, INC.
change of Address	
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)	

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 <math>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: XChange	<u>PT</u>	John Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change Add Remove			 	
2) Change Add Remove				
3) Change Add Remove			 	
4) Change Add Remove				
5) Change Add Remove				
6) Change Add Remove			 	

The date of each amendment(s) adoption: 12-19-2011				
Effective date <u>if applicable</u> :	12-14-2011 (no more than 90 days after amendment file date)			
	(no more than 90 days after amendment file date)			
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
The amendment(s) was/were add by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.			
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):			
"The number of votes east	for the amendment(s) was/were sufficient for approval			
by	, "			
	(voting group)			
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder			
Dated 12 -	-19-2011			
Signature	lirector, president or other officer – if directors or officers have not been			
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court			
	nted fiduciary by that fiduciary)			
	Steven UENOOK (Typed or printed name of person signing)			
	(Typed or printed name of person signing)			
	Bresident			
	(Title of person signing)			