

P03000011364

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SIHLE FINANCIAL SERVICES, INC.

DOCUMENT NUMBER: P03000011364

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

Please return all correspondence concerning this matter to the following:

Barbara Aldinger

(Name of Contact Person)

Sihle Insurance Group

(Firm/ Company)

871 Douglas Ave.

(Address)

Altamonte Springs, FL 32714

(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Greg Nulph

(Name of Contact Person)

at (407)

389-3563

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☐ \$43.75 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)

Mailing Address

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

Street Address

Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399



Sihle
Insurance
Group

www.sihleinsurance.com

871 Douglas Ave. • P.O. Box 160398 • Altamonte Springs, FL 32716 • 407-869-0962 • 1-800-728-0988 • Fax 407-774-0936

November 23, 2004

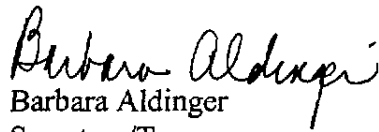
Florida Department of State
Division of Corporations
Attn: Anna Chesnut
PO Box 6327
Tallahassee, FL 32314

Re: Articles of Amendment

Per your conversation yesterday with Greg Nulph, I am requesting that you approve the name change from Sihle Financial Services Inc to GHG Insurance Inc. that we originally requested on the attached form. Our initial request was denied because the name we requested was too close to an existing name that ended in LLC. GHG Insurance LLC was filed in error. This entity is under the same ownership as Sihle Financial Services Inc. and will have the same officers and directors. Please process this name change as soon as possible.

If there is anything else that you would need from us to make this change please contact Greg Nulph at 407-389-3563. Thank you for your assistance in clearing this all up.

Sincerely,


Barbara Aldinger
Secretary/Treasurer

Since 1974



"The Difference is Service"



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

November 15, 2004

SIHLE INSURANCE GROUP, INC.
% BARBARA ALDINGER
871 DOUGLAS AVE.
ALTAMONTE SPRINGS, FL 32714

SUBJECT: SIHLE FINANCIAL SERVICES, INC.
Ref. Number: P03000011364

We have received your document for SIHLE FINANCIAL SERVICES, INC. and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6908.

Anna Chesnut
Document Specialist

Letter Number: 704A00064891

Articles of Amendment
to
Articles of Incorporation
of

SIHLE FINANCIAL SERVICES, INC.

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

P03000011364

(Document number of corporation (if known))

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

NEW CORPORATE NAME (if changing):

GHG INSURANCE, INC.

(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)**

NONE

(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)

(continued)

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TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 10-26-04

Effective date if applicable: 11/5/04

(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.

Signed this 26th day of October, 2004.

Signature

Barbara Aldinger

(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)

Barbara Aldinger

(Typed or printed name of person signing)

Secretary/Treasurer/Director

(Title of person signing)

FILING FEE: \$35