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#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION:	lamie Gioia Insurance Grou	ıp Inc
		!	
DOCUMENT NUI			
The enclosed Articl	les of Amendment and fee a	are submitted for filing.	
Please return all con	respondence concerning th	is matter to the following:	
		Jamie Gioia	
	N	Name of Contact Person	
	Jamie G	ioia Insurance Group Inc	
<del></del>		Firm/ Company	
τ	1	071 WP Ball Blvd	
·		Address	· · · · · · · · · · · · · · · · · · ·
•			
	5	Sanford, FL 32771	
	C	City/ State and Zip Code	
	JamieG E-mail address: (to be use	ioia@Allstate.com ed for future annual report notification)	
For further informa	tion concerning this matter,	please call:	
	Jamie Gloia of Contact Person	at (	88.8889 phone Number
Enclosed is a check	for the following amount n	nade payable to the Florida Depart	ment of State:
\$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 Ad Amendmen Division of P.O. Box 63 Tallahassee	t Section Corporations 327	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	e

#### **Articles of Amendment**

to

#### **Articles of Incorporation**

of

## JAMIE GIDIA INSURANCE GROUP INC. (Name of Corporation as currently filed with the Florida Dept. of State)

#### P04000144073

(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:

	-			<b>;</b> , '	The ne
ne must be distinguishable and contain in previation "Corp.," "Inc.," or Co.," or the must contain the word "chartered," "pro	designation."	Corp," "Inc	c," or "Co".	A professionál c	ed" or t
Enter new principal office address, if appincipal office address <u>MUST BE A STREE</u>		)			_
					JUN 21
Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE)					PH 4:3
If amending the registered agent and/or r new registered agent and/or the new regis	-		in Florida, e	nter the name of	the
Name of New Registered Agent:			<del> </del>	<u>.</u>	
New Registered Office Address:	(Flo	orida street	address)	Florida	
	(Cit	(עכ	(2	Zip Code)	
w Registered Agent's Signature, if changing the second street of the appointment as registered as			and accept th	; ne obligations of th	ne positic

### removed and title, name, and address of each Officer and/or Director being added: (Attach additional sheets, if necessary) Title Type of Action <u>Name</u> Address Niquita Pagan ☑ Add 1586 Wescott Loop ☐ Remove Winter Springs, FL 32708 ☐ Add ☐ Remove ☐ Add ☐ Remove E. If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific) 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

he date of each amendmen	t(s) adoption: <u>06</u>	/01/2010 .		<u>i</u>	_
ffective date <u>if applicable:</u>	.06/01/2010	(date of adoption is	• •		_
	(no more than 9	0 days after amendmer	ıt file date)		
	•	• •	•	i	
doption of Amendment(s)	(СН	ECK ONE)		,	
The amendment(s) was/we by the shareholders was/w			nber of votes ca	ast for the amendme	ent(
The amendment(s) was/we must be separately provide		_			tem
"The number of votes	cast for the amend	dment(s) was/were suf	ficient for appro	oval	
hv			"	<u>.</u>	
	(voting group)				
The amendment(s) was/we action was not required.  The amendment(s) was/we action was not required.					
•	06.01.10	<u> </u>			
Signature	Andly				
(By	y a director, presid	lent or other officer – i porator – if in the hand by that fiduciary)			
	VA	MIE GIOIA			
		ped or printed name of	person signing	)	
	3 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	KESINENT	1, 1		
	· (Title o	f nerson signing)			• •