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SECRETARY OF STATE
TALLAHASSEE, FIRE

MAY 0 9 2017
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Polette H. Gardner	Insurance Group	
DOCUMENT NUMI	DOCOCOCO 2072		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this mat	tter to the following:	
	Polette H. Myers		
		Name of Contact Person	n
	Polette H. Myers Insurance C	iroup, Inc	
		Firm/ Company	
	2606 E. Robinson St		
		Address	
	Orlando, Fl 32803		
		City/ State and Zip Cod	e
pgard	lner@allstate.com		
	•	ed for future annual report	notification)
	•	•	•
For further information	n concerning this matter, pleas	e call:	
Polette H. Myers		at (3800083 de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made [payable to the Florida Depa	artment 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)
Ame Divi P.O.	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Polette H. Gardner Insurance Group, Inc

Ale, Aled middle Ale Tilemide Deed a	654 4 h
<u>itly filed with the Florida Dept. o</u>	of State)
of Corporation (if known)	
is Florida Profit Corporation adop	ots the following amendment(s) to
	The new
tion," "company," or "incorpora "Co". A professional corporation "P.A."	ted" or the abbreviation
2606 E. Robinson St.	· ·
Orlando, FL 32803	2017 SEC
Same as above	-5 -5 -SSEE. F
	NII: 35
dress in Florida, enter the name	of the
street address)	
7 -	lorida
(City)	(Zip Code)
n <u>t:</u> r with and accept the obligations o	· •
	ion," "company," or "incorporal "Co". A professional corporation "P.A." 2606 E. Robinson St. Orlando, FL 32803 Same as above dress in Florida, enter the name ess: street address) (City)

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 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: X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{v}}$	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) X Change	P/D	Polette H. Myers	2606 E. Robinson St.
Add			Orlando, Fl 32803
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

ttach additional sheets, if necessary).	(Be specific) NA	
		•
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If an amendment provides for an exch provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
provisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: \(\bigcap \big	
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provisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: N	
provisions for implementing the amer	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: NA	

	May 4 2017	
The date of each amendment(s) adde this document was signed.	adoption:	, if other than the
M:	ay 4 2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this department of State's records.	late will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	(s)
	oproved by the shareholders through voting groups. The following statem or each voting group entitled to vote separately on the amendment(s):	nent
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and sharehold	ler
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder	
05/04/201	7	
Dated Signature	Folethof Myas	
` •	director, 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 counted fiduciary by that fiduciary)	art
	Polette H. Myers	
	(Typed or printed name of person signing)	
	P/D	
	(Title of person signing)	-