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15 MAY 12 PH 3: 54

205/18

COVER LETTER

TO: Amendment Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORA	TION: Delia M	1. Izquierdo	Insurance	Agency	Inc.
DOCUMENT NUMBE	R: PØ5000	1009075		_	
	Amendment and fee are su				
Please return all correspo	ondence concerning this mat	tter to the following:			
	Alexander	Rivarola-	Borroto		
D	klia M. Izqu	Name of Contact Person	_	Inc.	
_	235 SW Le	ieure Rd	3rd Floor		
	Miami	Address FL 33 13-1 City/ State and Zip Code			
al	exanderbor	City/ State and Zip Code roto@gmai ed for future annual report	1.com	_	
For further information e	oncerning this matter, pleas	e call:			
	Zivarola-Borr	at (305 Area Co	442 - 218 de & Daytime Telephone N	2 lumber	
Enclosed is a check for the	ne following amount made p	payable to the Florida Depa	rtment of State:		
□ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	□\$43.75 Filling Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amend Divisio	g Address Iment Section on of Corporations ox 6327	Amend Divisio	Address ment Section n of Corporations Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently filed with the Florida Deptitor State) PH 3: 54

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delia M. (Document Number of Corporation (Trknown) Pursuant to the provisions of section 607,1006. Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." N/A B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Florida (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered Agent, if changing

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: X Change	<u>PT</u>	John Doc	
X Remove	V	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Delia M. Irquierdo	3rd Floor
Add			
Remove			Miami, FC 33134
2) Change	P	Alexander Rivarda-Born	
_ X _Add			3rd Floor
Remove	1		Miami, FC 33134
3) Change	V	Michelle M. Izquiado	235 SW Lejeune Rd
Add		•	3rd Flour
Remove			Miami, FC 33134
4) Change	<u></u>		
Add			TALI
Remove			MAN 12
5) Change		- A box - Abril	2
Add			<u> </u>
Remove			St St
6) Change			
Add	•		
Remove			

Attach additional sheets, if necessary).	(Be specific)		
J/R			
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			22
an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,		
provisions for implementing the amer	idment if not contained in the amendment itself:		
(if not applicable, indicate N/A)			
)(A			
			_
		·	

The date of each amendment(s) adoption:	_, if otl	ner than the
Effective date if applicable: 05/07/2015 (no more than 90 days after amendment file date)		
(no more than 90 days after amendment file date)		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be i	isted as the
Adoption of Amendment(s) (CHECK ONE)		
☐ The amendment(s) was/were adopted 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.	15 MAY 12	SECR TALL/
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.		
Dated 05 /07 /2015	PH	
Dated 05/07/2015 Signature Delia M Lequesta	3: 54	S TATE
(By a director, president or other filter – 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)		J.
Delia M Izquiendo (Typed or printed name of person signing)		
(Title of person signing)		