

P05000024135

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05/26/06--01037--012 **43.75

FILED
06 JUN 26 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

As of 6/27/06
Amended



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 5, 2006

WENDY M COX
COX INSURANCE SERVICES II, INC.
6715 70TH CT E
BRADENTON, FL 34203

SUBJECT: COX INSURANCE SERVICES II, INC.
Ref. Number: P05000024135

We have received your document for COX INSURANCE SERVICES II, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(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) 245-6957.

Pamela Smith
Document Specialist

Letter Number: 306A00038641

RECEIVED
06 JUN 26 AM 8:00
DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Cox Insurance Services II, INC.

DOCUMENT NUMBER: P05000024135

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

Please return all correspondence concerning this matter to the following:

Wendy M. Cox

(Name of Contact Person)

Cox Insurance Services II, INC.

(Firm/ Company)

6715 70th Ct E

(Address)

Bradenton FL 34203

(City/ State and Zip Code)

For further information concerning this matter, please call:

Sloan Cox

(Name of Contact Person)

at (

941)

795-0200

(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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

Cox Insurance Services II, INC.

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

FILED

06 JUN 26 AM 9:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P05000024135

(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):

1ST CHOICE INSURANCE GROUP OF FLORIDA, 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)**

correct tax id to # 61-1484766 tax id # listed is from our other corp.

Cox Insurance Services, INC. 16-1666000

(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)

N/A

(continued)

The date of each amendment(s) adoption: 05/23/2006

Effective date if applicable: 05/23/2006
(no more than 90 days after amendment file date)

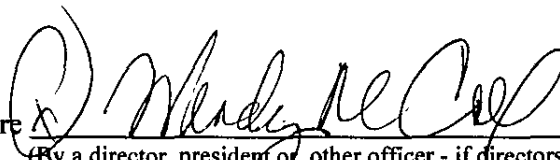
Adoption of Amendment(s) (CHECK ONE)

- ☒ 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.

Signature



(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)

Wendy M. Cox

(Typed or printed name of person signing)

President

(Title of person signing)

FILING FEE: \$35