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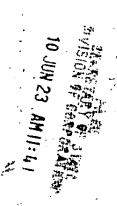


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AmenQ C.COULLIETTE JUN 2 3 2010

EXAMINER



COVER LETTER

TO: Amendment Section-Division of Corporations

NAME OF CORPORATION:	Wavrock Health Insurance, Inc.	
		
DOCUMENT NUMBER:	P05000153762	
The enclosed Articles of Amendment a	and fee are submitted for filing.	
Please return all correspondence concer	rning this matter to the following:	
	Paul L. Wavrock	
	Name of Contact Person	-1
	Wavrock Health Insurance, Inc.	•,
	Firm/ Company	
	410 Chapman Road W	
	Address	.
in in the second se	Lutz, FL 33548	
	City/ State and Zip Code	• . '
	paul@wavrock.com	
E-mail address:	(to be used for future annual report notification)	
For further information concerning this	matter, please call:	
Paul @wavrock.com	at (813) 813-857-5022	
Name of Contact Person	Area Code & Daytime Telephone Number	er -
Enclosed is a check for the following a	mount made payable to the Florida Department of Stat	te:
□\$35 Filing Fee	tus Certified Copy Certificate (Additional copy is enclosed) Certified	e of Status
Mailing Address Amendment Section	Street Address Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	<i>.</i>
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of

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	ration (if known) tutes, this Florida Pro tion: proporation," "compan "Corp," "Inc," or "Co ciation," or the abbre 410 Chapman I Lutz, FL 33548	ration (if known) tutes, this Florida Profit Corporation a tion: proporation," "company," or "incorpor" "Corp," "Inc," or "Co". A professional ciation," or the abbreviation "P.A." 410 Chapman Road W Lutz, FL 33548 410 Chapman Road W

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)

Title	<u>Name</u>	Address	Type of Action
Pres	Paul L. Wavrock	410 Chapman Road W Lutz, FL 33548	
<u>VPST</u>	Nancy Wavrock	8712 Winsome Way Land O' Lakes, FL 34637	□ Add ☑ Remove
			Add Remove
	ding or adding additional Articles, enditional sheets, if necessary). (Be s		
			
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F. Ifanai	nendment provides for an exchange,	reclassification, or cancellation of	issued shares,
∙ <u>provisi</u> (<i>if n</i>	ons for implementing the amendment of applicable, indicate N/A)	t if not contained in the amendmen	it itself:
	avrock, 1000 Total Shares Issue	ed: Sole Owner and Operator.	
was gray			
	14 V Annual Otto		
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The date of each amendmen				· · · · · · · · · · · · · · · · · · ·	
Effective date <u>if applicable</u> :	(de	ate of adoption is	required)	. 1	
enecuve date <u>ii applicable</u> .	(no more than 90 day	vs after amendme	ent file date)		
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Adoption of Amendment(s)	(CHECK	(ONE)	÷		
The amendment(s) was/we by the shareholders was/w			imber of votes	cast for the amen	dment(s
The amendment(s) was/we must be separately provide					
"The number of votes	cast for the amendmen	nt(s) was/were su	fficient for app	roval	
by			"		
	(voting group)		•	1	-
The amendment(s) was/we action was not required.	ere adopted by the incom	rporators without	t shareholder a	ction and shareho	lder
Dated Nov	ember 3, 2008				
Signature	(3)	7		1	
(By	y a director, president of ected, by an incorporate pointed fiduciary by the	or – if in the hand			
		Paul L. Wav			
	(Typed o	r printed name o		g) :	
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