P0600004197

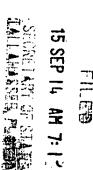
(Re	questor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ALL RISK INS	SURANCE GROUP, INC.
DOCUMENT NUMBER: P06000041197	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this	matter to the following:
LISA PACILLO	
	Name of Contact Person
ALL RISK INSURANCE	GROUP, INC.
	Firm/ Company
101 PLAZA REAL SOUT	TH, SUITE 218
	Address
BOCA RATON, FL 3343	2
 	City/ State and Zip Code
lisa@allriskinsurancegroup.com	
•	e used for future annual report notification)
For Conthering Commention, and are an area and	
For further information concerning this matter, pl	ease can:
LISA PACILLO	at (561) 395-5220
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Department of State:
■ \$35 Filing Fee Securificate of Status	
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

ΔII	RISK	INSHR	ANCE	GROUP.	INC

(Document Number	of Corporation (if known)	
1006, Florida Statutes, this	s Florida Profit Corporation adopts the following amendment(s	
me of the corporation:		
	The new	
	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."	
if annlicable:	101 PLAZA REAL SOUTH	
TREET ADDRESS)	SUITE 218	
	BOCA RATON, FL 33432	
cable: OFFICE BOX)	101 PLAZA REAL SOUTH	
	SUITE 218	
	BOCA RATON, FL 33432	
d/or registered office address	dress in Florida, enter the name of the ss:	
101 PLAZA REAL SOU	TH, SUITE 218	
(Florida s	treet address)	
BOCA RATON	, Florida	
	(City) (Zip Code)	
nanging Registered Agen ered agent. I am familiar	t: with and accept the obligations of the position.	
	me of the corporation: ain the word "corporation of the corporation "Corp," "Inc," or the abbreviation of applicable: TREET ADDRESS (Inc.) Cable: OFFICE BOX(Inc.) d/or registered office address or registered office address of the corporation of the corpor	

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	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	Р	RANDY B. SCHLEGER	101 PLAZA REAL SOUTH
Add			SUITE 218
Remove			BOCA RATON, FL 33432
2) X Change	VP	LISA PACILLO	101 PLAZA REAL SOUTH
Add			SUITE 218
Remove			BOCA RATON, FL 33432
3) Change			
Add			
Remove			
4) Change			· ·
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
D			

Attach additional sheets, if necessary).	icles, enter change(s) here: (Be specific)
f an amandmant provides for an eych	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	1
(if not applicable, indicate N/A)	·
(if not applicable, indicate N/A)	·
(if not applicable, indicate N/A)	•
(if not applicable, indicate N/A)	

	SEPTEMBER 8, 2015	
The date of each amendment date this document was signed	(s) adoption:	, if other than the
	SEPTEMBER 8, 2015	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ad 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)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
	EMBER 8, 2015	
Dated Signature	Waraulto	
	y a director, president or other officer – if directors or officers have not been	
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)	
	LISA PACILLO	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	