P0600057086

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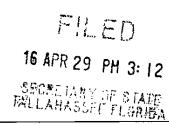
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: TK INSURANCE	AND FINANCIAL SERVI	CES, INC
DOCUMENT NUME	P06000057086	<u>,</u>	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	TY A. EVANS		
		Name of Contact Persor	1
	TK INSURANCE AND FIN	ANCIAL SERVICES, INC	:
	<u></u>	Firm/ Company	
	6801 WALLACE ROAD	, ,	
		Address	
	ORLANDO, FL 32819		
		City/ State and Zip Code	2
TYE	VANS@TK-INSURANCE.C	ОМ	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
TY EVANS		at (321	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 Fec & 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)
Amo Divi P.O	cling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



TK INSURANCE AND FINANCIAL SERVICES INC

(Name o	of Corporation as currently	filed with the Florida Dept. of State)
P06000057086		
	(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	me of the corporation:	
NOT APPLICABLE		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc." or "(n," "company," or "incorporated" or the abbreviation Co". A professional corporation name must contain the P.A."
D. F. A	:	NOT APPLICABLE
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>	<u>it applicable:</u> TREET ADDRESS)	
C. Enter new mailing address, if appli	cable:	NOT A DDI IGA DI E
(Mailing address MAY BE A POST		NOT APPLICABLE
D. If amending the registered agent an new registered agent and/or the new	d/or registered office addr	ess in Florida, enter the name of the
	NOT APPLICABLE	•
Name of New Registered Agent		
	(Florida stre	vet address)
New Registered Office Address:	NOT APPLICABLE	, Florida
		(City) (Zip Code)
	,	
New Registered Agent's Signature, if c	hanging Desistered Agent:	
		ith and accept the obligations of the position.
	-	
	Signature of New R	egistered 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 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
I) Change	v	TYLER T. EV	ANS	6801 WALLACE ROAD
X Add				ORLANDO, FL 32819
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		-		
Adđ				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Damassa				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
NOT APPLICABLE	
F. If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
NOT APPLICABLE	

The date of each amendment(s) adoption:	, if other than the
date this document was signed. MAY 1, 2016 Effective date if applicable:	
(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 we document's effective date on the Department of State's records.	fill not be listed 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.	
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated_May 1, 2016	
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 figuriary by that fiduciary)	
TY EVANS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	