P06000133863

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(PM)

COVER LETTER

TO: Amendment Section

TORCH MORS Division of Corporations NAME OF CORPORATION: The JG & A Benefits Group, Inc. DOCUMENT NUMBER: P06000133863 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: J. Gregory Campanini Name of Contact Person The JG & A Benefits Group, Inc. Firm/ Company 3881 Trail Ridge Road Address Middleburg, FL 32068 City/ State and Zip Code jgregoryassoc1@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: J. Gregory Campanini Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee **□\$43.75** Filling Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building

> 2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation of

,		
	Articles of Amendment	
and the second	to	20 PM
	Articles of Incorporation	
	of	
The JG & A Benefits G	Group, Inc.	To the second
(Name of Corporation	as currently filed with the Florida Dept. of State)	
(Document)	ment Number of Corporation (if known)	EX.
Pursuant to the provisions of section 6 its Articles of Incorporation:	07.1006, Florida Statutes, this Florida Profit Corporation	adopts the following amendment(s) to

Pursuant to the provisions of section 607.1006, Flats Articles of Incorporation:	orida Statutes, this <i>Flor</i>	ida Profit Corporation ad	opts the following amend
A. If amending name, enter the new name of the	he corporation:		
			The
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Covord "chartered," "professional association," or	Corp," "Inc," or "Co"	. A professional corpora	
B. Enter new principal office address, if applic Principal office address <u>MUST BE A STREET</u>		· · · · · · · · · · · · · · · · · · ·	
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	_		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E_BOX)		
	_		
). If amending the registered agent and/or reg	 ristered office address	in Florida, enter the nam	e of the
new registered agent and/or the new registe		TO THE PARTY OF THE PARTY	<u> </u>
Name of New Registered Agent			
	(Florida street a	ddress)	
New Registered Office Address:	•	, Florida	
Then Registered Office Madress.	(City)	, rionda_	(Zip Code)
New Registered Agent's Signature, if changing			
hereby ascept the appointment as registered age	ent. 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 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)	Title	<u>Name</u>	<u>Addres</u> s			
1) Change	V	Victoria Campanini	3881 Trail Ridge Road			
Add			Middleburg, FL 32068			
Remove						
2) Change						
Add	-					
Remove						
3) Change						
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change						
Add						
Remove						
[]						
6) Change						
Add						
Remove						

	idditional shee	ets, if necessary). (Be specif	thange(s) here:			
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provisio	ons for imple	ovides for an exementing the au	<u>nendment if n</u>	ssification, or c ot contained in	ancellation of is the amendment	sued shares, titself:	
							•
		····-					

The date of each amendment	(s) adoption: August 1, 2014	, if other than the
date this document was signed.		
Effective date <u>if applicable</u> :	August 1, 2014	
in applicable.	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
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.	
	e approved by the shareholders through voting groups. The following statement d 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/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	
Augi	ust 1, 2014	
	11/2	
Signature(B	y a director, president or other officer - if directors or officers have not been	
se	elected by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)	
	J. Gregory Campanini	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	



August 18, 2014

J. GREGORY CAMPANINI THE JG & A BENEFITS GROUP, INC. 3881 TRAIL RIDGE ROAD MIDDLEBURG, FL 32068

SUBJECT: THE JG & A BENEFITS GROUP, INC

Ref. Number: P06000133863

We have received your document for THE JG & A BENEFITS GROUP, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must have original signatures.

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) 245-6838.

Cheryl R McNair Regulatory Specialist II

Letter Number: 414A00017669