06 000 141473

(Re	equestor's Name)		
(Ad	idress)		
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
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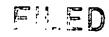
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Insurance Program	s of America, Inc.	
DOCUMENT NUMI	BER: P06000141473		
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Tim West, Esq.		
		Name of Contact Persor	1
	Colodny Fass		
		Firm/ Company	
	1401 NW 136th Ave., Ste. 20	, ,	
		Address	
	Sunrise, Florida 33323		
		City/ State and Zip Code	
twest	@colodnyfass.com		
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Tim West		954 at (de & Daytime Telephone Number
Name o	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:
S35 Filing Fee	☐S43.75 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)
Amo Divi P.O.	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	ations Division of Corporations Clifton Building	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



Insurance Programs of America, Inc.

2019 MAR 25 PH 2: 42

(Name of Corporation as cu	rrently filed with the Florida Dept. of State)
P06000141473	าว และหลองได้เ กี ย
(Document Nun	iber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation	<u>on:</u>
Burkey Hagle, Inc.	The new
	oration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the ution "P.A."
• ,	N/A
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
). If amending the registered agent and/or registered office	
new registered agent and/or the new registered office ad	<u>ldress:</u>
Name of New Registered Agent N/A	
(Flor	rida street address)
New Registered Office Address:	, Florida
New Registerete zyjite Audress.	(City) (Zip Code)
Sew Registered Agent's Signature, if changing Registered a hereby accept the appointment as registered agent—I am fan	Agent: niliar with and accept the obligations of the position.
never, weep me appointment to regionered agent - rum jun	and accept the surganism 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:

 $P = President; \ F = Vice President; \ T = Treasurer; \ S = Secretary; \ D = Director; \ TR = Trustee; \ C = Chairman or Clerk; \ CEO = Chief Executive Officer; \ CFO = Chief Financial Officer. \ If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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		
\underline{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				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change				
Add				
Remove				
4) Change			·	
Add				
Remove				
5) Change				
Add				
Remove				
				_
6) Change				
Add				
Remove				

E. If amending or adding addition (Attach additional sheets, if neces	al Articles, enter chang sary) (Be specific)	e(s) here:		
N/A				
-				
			<u> </u>	
		-		•
				
			<u>.</u>	
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	· · · · · · · · · · · · · · · · · · ·			
F. If an amendment provides for a	in exchange, reclassifica	ition, or cancellation of	issued shares,	
provisions for implementing the (if not applicable, indicate :	<u>ie amendment if not cor</u> V/4)	itained in the amendme	nt itself:	
N/A	•			
		*****		······································
<u>. </u>				
	 ,			
				
			 	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 document's effective date on the Department of State's records.	will 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)	
(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 sin reholder action and shareholder action was not required.	
Dated March 15, 2019	
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)	
Christopher L. Hagle	
(Typed or printed name of person signing)	
President and Director	

(Title of person signing)