

P07000060692

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

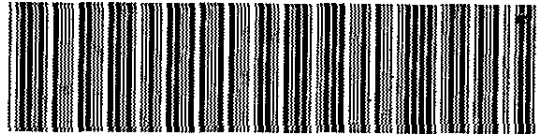
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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name change
Amend

08/09/07--01022--006 **35.00

FILED
2007 AUG -9 AM 11:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AOL
8/16/07

COVER LETTER

**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: HSBR INSURANCE INC.

DOCUMENT NUMBER: P07000060692

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

RODNEY A BROWN

(Name of Contact Person)

HSBR INSURANCE INC.

(Firm/ Company)

9562 SE JORDAN WAY

(Address)

Hobe Sound, FL. 33455

(City/ State and Zip Code)

For further information concerning this matter, please call:

RODNEY A BROWN

(Name of Contact Person)

at (772) 546-7292

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 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)

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

HSBW INSURANCE & FINANCIAL SERVICES

(Name of corporation as currently filed with the Florida Dept. of State)

P07000060692

(Document number of corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

NEW CORPORATE NAME (if changing):

HSBR INSURANCE INC.

(Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")
(A professional corporation must contain the word "chartered," "professional association," or the abbreviation "P.A.")

AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s) and/or Article Title(s) being amended, added or deleted: **(BE SPECIFIC)**

N/A

(Attach additional pages if necessary)

If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

(continued)

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2007 AUG -9 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The date of each amendment(s) adoption: 08-01-07

Effective date if applicable: 08-01-07
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were approved 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.

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)

Rodney A Brown
(Typed or printed name of person signing)

owner - Director
(Title of person signing)

FILING FEE: \$35

**Electronic Articles of Incorporation
For**

P07000060692
FILED
May 21, 2007
Sec. Of State
jshivers

HSBW INSURANCE & FINANCIAL SERVICES, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

HSBW INSURANCE & FINANCIAL SERVICES, INC.

(New) H S B R I N S U R A N C E F N C .

Article II

The principal place of business address:

9069-A SE BRIDGE ROAD
HOBE SOUND, FL. US 33455

/ New 9055 SE. BRIDGE ROAD
HOBE SOUND, FL US 33455

The mailing address of the corporation is:

9069-A SE BRIDGE ROAD
HOBE SOUND, FL. US 33455

/ New 9055 SE. BRIDGE ROAD
HOBE SOUND, FL US 33455

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

1500 SHARES AT \$0.00 PAR VALUE PER SHARE

Article V

The name and Florida street address of the registered agent is:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL. 32301