

P080000000774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

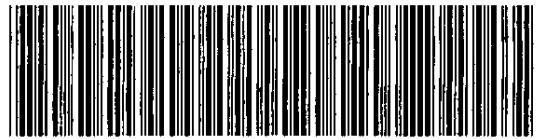
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2009 OCT 23 AM 10:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

OCT 26 2009

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Russ Deboo Insurance Agency Inc.

DOCUMENT NUMBER: 908000000774

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

Please return all correspondence concerning this matter to the following:

Russ Deboo
Name of Contact Person

Firm/ Company

201 N. FEDERAL HWY #109
Address

DEERFIELD BEACH, FL 33441
City/ State and Zip Code

RussDeboo@GMAIL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Russ Deboo at (561) 900-6000
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☒ \$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

Already paid



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 8, 2009

RUSTOM J DEBOO
1100 SW 2ND ST
BOCA RATON, FL 33486

SUBJECT: RUSS DEBOO INSURANCE AGENCY, INC.
Ref. Number: P08000000774

We have received your document for RUSS DEBOO INSURANCE AGENCY, 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 809A00032545

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
(C)

P0800000 774

Page 1 of 3

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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:

(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an 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)

The date of each amendment(s) adoption: 10/21/09
(date of adoption is required)
Effective date if applicable: 10/21/09
(no more than 90 days after amendment file date)

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 10/21/09

Signature Ruston J. Debow
(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)

RUSTON J. DEBOW
(Typed or printed name of person signing)

PRESIDENT / OWNER
(Title of person signing)