# P08000019802

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: FLORIDA PREFE	ERRED INSURANCE INC	
DOCUMENT NUMB	ER:		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	BRIAN TAYLOR		
-		Name of Contact Perso	n
	FLORIDA PREFERRED IN	SURANCE INC	
-		Firm/ Company	
	8406 PCB PRKWY STE L	Firm/ Company	
-		Address	
	PANAMA CITY BEACH, F	L 32407	
-		City/ State and Zip Cod	e
bti@k	nology.net		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	ee call: at (_850	249-8060
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made		·
\$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)
Amer Divis P.O. 1	ng Address  Idment Section  Id	Amend Division Clifton 2661 E	Address Iment Section on of Corporations Building executive Center Circle assee, FL 32301

FILEL SECRETARY OF STATE SIVISION OF CORPORATION

#### Articles of Amendment to Articles of Incorporation of

2017 JAN 17 PM 2: 22

### FLORIDA PREFERRED INSURANCE INC

(Name of Corporati	ion as currently filed with the Florida Dept. of State)
	P08000019802
(Docum	ment Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Floridatis Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:  The new
	rd "corporation," "company," or "incorporated" or the abbreviation o, " "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>
D. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	. Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	zistered Agent: I am familiar with and accept the obligations of the position.
Sign	nature 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 Do		
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change	<del> </del>	_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3 ) Change		_		
Add				
Remove				
4) Change		<del>-</del>		
Add				
Remove				<del></del>
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
	-	
. <u>If an</u> pro	amendment provides for an exchange, reclassification, or cancellation of issued shares, visions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	

	JIVISION OF CONTOURS than the
The date of each amendment(s) adoption:	TVISION OF TOIR other than the
date this document was signed.	9017 1441 17 000
Effective date if applicable:	2017 JAN 17 PM 2: 23
(no mor	e than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the document's effective date on the Department of State's recommendate.	e applicable statutory filing requirements, this date will not be listed as the cords.
Adoption of Amendment(s) (CHECK ON	<u>E</u> )
The amendment(s) was/were adopted by the sharehold by the shareholders was/were sufficient for approval.	ers. The number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the sharehol must be separately provided for each voting group ent	
"The number of votes cast for the amendment(s)	• •
by(voting group	."
(voting group)	
☐ The amendment(s) was/were adopted by the board of daction was not required.	
☐ The amendment(s) was/were adopted by the incorporat action was not required.	ors without shareholder action and shareholder
1/11/2017 Dated	
Signature (By a director president or of	her officer – if directors or officers have not been
selected, by an incorporator - appointed fiduciary by that fi	if in the hands of a receiver, trustee, or other court
	BRIAN TAYLOR
(Typed or	printed name of person signing)
	PRESIDENT
	(Title of person signing)