P0800039572

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	: #)
PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nam	ne)
(Do	ocument Number)	
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S. HAWKES

AUG - 2012

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION. D.B. & A	ssociates Insurance Agency, P.A.
DOCUMENT NUMBER: P08000039	
The enclosed Articles of Amendment and fee are	
Please return all correspondence concerning this	matter to the following:
Branwen R. Sp	ragg
	Name of Contact Person
D.B. & Associa	tes Insurance Agency, P.A.
	Firm/ Company
4316 El Mar Dr	ive Unit 402
	Address
LBTS/ FL 3330	8
	City/ State and Zip Code
BranwenSpragg@	comcast net
	e used for future annual report notification)
	- · · · · · · · · · · · · · · · · · · ·
For further information concerning this matter, p	lease call:
Branwen Spragg	at (954) 599-9201
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Department of State:
\$35 Filing Fee Certificate of Statu	
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

	r of Corporation (if known)		más ába fallassina amand
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orda Statutes, tris <i>Florida Fl</i>	roju Corporation ado	pis the following amend
A. If amending name, enter the new name of the	e corporation;		
NIA	 		The n
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	orp," "Inc," or "Co". A p		ated" or the abbreviati
B. Enter new principal office address, if applica (Principal office address MUST BE A STREET A	able: (DDRESS)		
			芸術を
		. * * * * * *	一场
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	ROX)		
,			Friend S
			
D. If amending the registered agent and/or reginew registered agent and/or the new registered.		rida, enter the name	of the
	red 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	Registered Agent:		

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	PT John	1 Doe	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
X Add	SV Sall	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	CEO	Thomas DiBello	4316 El Mar Drive
X Add			Unit 402
Remove			LBTS, FL 33308
2) Change	***************************************		
Add			
Remove			
3) Change		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	PM 4: 12
Add			2
Remove			
4) Change			
Add			***************************************
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			- harring and a constitution of the constituti
Remove			

E. If amending or adding additiona (Attach additional sheets, if necessions)	Articles, enter change(s) here: ary). (Be specific)	
NA		
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		1.1. S
		P. F.
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		######################################
. If an amendment provides for ar	exchange, reclassification, or cancellation of issued	i shares,
provisions for implementing the (if not applicable, indicate N	amendment if not contained in the amendment itse	elf:
NIA		
		
		
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	-	
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The date of each amendment(s) add	ption: 08/09/2012	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s) icient for approval.	
	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	"	
	(voting group)	
☐ The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	SECTION AND AND AND AND AND AND AND AND AND AN
The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	1 2
Dated 08/09/2	012	
Signature	(B)Pm	7
(By a dir selected,	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court d fiduciary by that fiduciary)	
E	Branwen R. Spragg	
_	(Typed or printed name of person signing)	-
F	President	
	(Title of person signing)	

. . . .