## P0800017909

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

## COVER LETTER

**TO:** Amendment Section Division of Corporations

	C & C INIC	LIDANICE ACEN	ICV INC				
	ORATION: <u>C &amp; S INS</u>		C1, INC.				
DOCUMENT NUM	1BER: -0000004790						
The enclosed Article	es of Amendment and fee are su	bmitted for filing.					
Please return all corr	respondence concerning this ma	tter to the following:					
	INGRIS SANCHE	ΞZ					
	C & S INSURAN	CE AGENCY, IN	IC.				
		Firm/ Company					
	303 NE 3rd AVE, STE 2						
		Address					
	CAPE CORAL, F	L 33909					
		City/ State and Zip Code	2				
IS	ANCHEZ@FEDUS	SAQUOTE.COM					
	E-mail address: (to be us	sed for future annual report	notification)				
For further informati	ion concerning this matter, plea	se call:	· · · · · ·				
INGRIS SAI	NCHEZ	at (239	573-6458				
Name	e of Contact Person	Area Co	de & Daytime Telephone Number				
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment 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)				
<u>M</u>	ailing Address		Address				
	mendment Section ivision of Corporations	Amendment Section Division of Corporations					
	O. Box 6327	Clifton Building					
Τε	illahassee, FL 32314	2661 Executive Center Circle					
, ,	•	Tallahassee, FL 32301					

## Articles of Amendment to Articles of Incorporation of

## C & S INSURANCE AGENCY, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P08000047909 (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: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) N/A C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

address of each Officer (Attach additional sheet. Please note the officer/d P = President; V= Vice Executive Officer; CFO held. President, Treasur. Changes should be noted a change, Mike Jones le. Mike Jones, V as Remov	nand/or I s, if neces lirector til Presiden = Chief er, Direct d in the fo	Director I stary) tile by the j stif, T= Tre Financial tor would corporation	being added:  first letter of the office title:  easurer; S= Secretary; D= Director; TR=  l Officer. If an officer/director holds more be PTD.  manner. Currently John Doe is listed as the on, Sally Smith is named the V and S. Thes	Trustee; C = Chairman or Clerk; CEO = Chief e than one title, list the first letter of each office by PST and Mike Jones is listed as the V. There is e should be noted as John Doe, PT as a Change,		
Example: X Change	<u>PT</u>	John Doe				
X Remove	<u>v</u>	Mike Jones				
X Add	<u>sv</u>	Sally S	<u>mith</u>			
Type of Action (Check One)	Title		<u>Name</u>	Address		
1) Change	<u>T</u>	_	YULEIDIS SANCHEZ	303 NE 3rd, STE 2		
Add				CAPE CORAL, FL 33909		
X Remove						
2) Change		_	<u> </u>			
Add	,			·		
Remove						
3 ) Change		_				
Add						
Remove						
4) Change		_				
Add				·		
Remove			·			
5) Change	····	_				
Add						
Remove			. •	· .		
6) Change		, <del>-</del>				
Add						

\_\_ Remove

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	cles, enter chang (Be specific)	e(s) here:		
N/A	·	٠.		
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F. If an amendment provides for an excha	inge, reclassifica	tion, or cance	ellation of issue	d shares.
provisions for implementing the amen (if not applicable, indicate N/A)	dment if not con	tained in the	amendment its	elf:
RECLASIFY SHARE:				
INGRIS SANCHEZ: 50%	<del>- ,</del>			
ALBA BACALLAO: 50%				
	<u> </u>	· <u>-</u> ·		
			·	
		·		
· · · · · · · · · · · · · · · · · ·				

The date of each amendment	t(s) adoption: U8/24/2U   Z
Effective date <u>if applicable</u> :	08/24/2012
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/weby the shareholders was/weby	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_08/	24/2012
Signature	x Jugio Sainties
se	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)
	INGRIS SANCHEZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)