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13 AUG 27 AN 9: OG
SECRETARY OF STATE
LIALLAMASSEE FLORINA

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Epperson DOCUMENT NUMBER: P0800050		oup, Inc
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Natalie Eppers	son	
	Name of Contact Persor	· · · · · · · · · · · · · · · · · · ·
Epperson Insu	rance Group	
	Firm/ Company	
1924 Santa Ba	arbara Blvd #3	
	Address	
Naples, FL 34	116	
<u> </u>	City/ State and Zip Code	2
natalia@annaraa	ninguranaa aa	
natalie@epperso	used for future annual report	
E-man address. (to be	used for future annual report	notification)
For further information concerning this matter, ple	ase call:	
Notalia Engaga	220	224 7444
Natalie Epperson		_,331-7141
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$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	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building xecutive Center Circle ussee, FL 32301

Articles of Amendment Articles of Incorporation of

		FILED
4 AN A: 50	13	13 AUG 27 AM 8:50
SECRETARY OF STATES	SEC. TALI	ECRETARY OF STATES

Epperson Insurance Group, Inc

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

P08000050365

(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

Epperson Insurance & Fi	· · · · · · · · · · · · · · · · · · ·	
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "(word "chartered," "professional association," of	Corp," "Inc," or "Co". A professiona	
B. Enter new principal office address, if applie (Principal office address <u>MUST BE A STREET</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>E BOX</u>)	
D. If amending the registered agent and/or registered agent and/or the new regist		r the name of the
Name of New Registered Agent		
		
	(Florida street address)	
New Registered Office Address:		, Florida
New Registered Office Address:		, Florida(Zip Code)

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 Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			•
Remove			
5) Charge			
5) Change	***		
Add			
Remove			
6) Change			
Add			
Pamouu			

Attach ac	ling or adding a dditional sheets,	if necessary).	(Be specific)			
						*** ***	

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provisio	nendment providens for implement applicable, is	enting the ame	hange, reclass endment if no	ification, or c t contained in	ancellation of the amendme	issued shares, ent itself:	

The date of each amendment(s) ac	08/23/2013	, if other than the
date this document was signed.	3/23/2013	***************************************
	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) officient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
_{Dated} 08/23	3/2013	
Signature	tdi En	
selecte	director, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court ted fiduciary by that fiduciary)	
	Natalie Epperson	
	(Typed or printed name of person signing)	_
	President	
	(Title of person signing)	