## P08000060879

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	RATION: INSU	JRANCE SOLUTIONS GR	OUP, INC.
DOCUMENT NUMI	BER:	P08000060879	
The enclosed Articles	of Amendment and fee	are submitted for filing.	
Please return all corre	spondence concerning th	is matter to the following:	
	JL	JLIO A GAVILANES	
	1	Name of Contact Person	
	INSURANC	E SOLUTIONS GROUP, INC.	
		Firm/ Company	
2100 PONCE DE LEON BLVD, SUITE 1070			
		Address	
**************************************		AL GABLES, FL 33134	
	C	City/ State and Zip Code	
	E-mail address: (to be use	ed for future annual report notification)	<del></del>
For further information	n concerning this matter,	, please call:	
JULIO .	A GAVILANES	at ( 786 ) 2  Area Code & Daytime Tel	14-1045
Name of Contact Person		Area Code & Daytime Tel	lephone Number
Enclosed is a check fo	r the following amount r	nade payable to the Florida Depar	tment 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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	le

Tallahassee, FL 32301

## Articles of Amendment

Articles of Incorporation

FILED

of INSURANCE SOLUTIONS GROUP, INCOIL FEB 23 PM 3:08 (Name of Corporation as currently filed with the Florida Dept. of State) RY US STATE P08000060879 (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: 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: 2100 PONCE DE LEON BLVD (Principal office address MUST BE A STREET ADDRESS) **SUITE 1070** CORAL GABLES, FL 33134 C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) SAME 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: CROSSWORLD PARTNERS & CQ Name of New Registered Agent: 701 WATERFORD WAY, SUITE 160 New Registered Office Address: (Florida street address) MIAMI, FL \_, Florida\_33126 (City) (Zip Code) 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.

## 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)

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<u>Title</u>	Name '	<u>Address</u>	Type of Action
PT	JULIO A GAVILANES	2100 PONCE DE LEON BLVD SUITE 1070 CORAL GABLES, FL 33134	☑ Add □ Remove
<u>VP</u>	RICARDO L SANCHEZ JR	2100 PONCE DE LEON BLVD SUITE 1070 CORAL GABLES, FL 33134	☑ Add ☐ Remove
<u>S</u>	JOHN F LOPEZ	2100 PONCE DE LEON BLVD SUITE 1070 CORAL GABLES, FL 33134	Add Remove
	ding or adding additional Articles, enter dditional sheets, if necessary). (Be spec		
provisio	nendment provides for an exchange, recons for implementing the amendment is of applicable, indicate N/A)		

The date of each amendmen	t(s) adoption: FEBRUARY 14, 2011
Effective date <u>if applicable</u> :	FEBRUARY 14, 2011
	(no more than 90 days after amendment file date)
, , , ,	
Adoption of Amendment(s)	(CHECK ONE)
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.
The amendment(s) was/we must be separately provide	ere 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	cast for the amendment(s) was/were sufficient for approval
by	"
	(voting group)
The amendment(s) was/we action was not required.	ere adopted by the board of directors without shareholder action and shareholder
action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated_FEE Signature	BRUARY 15, 2017
(By sele	y a director, president or other officer – if directors or officers have not been ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	JULIO A GAVILANES
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)