# PU8000061607

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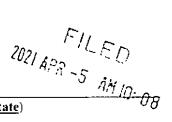
#### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	JB	Insurance 60	roup Inc.	
DOCUMENT NUMBER:	P080000	61607	·	
The enclosed Articles of Amendo	nent and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following:		
	Trist	na Bernstein		
	Bernste	Name of Contact Person  ACCUUNTY  Firm/ Company		
4440 PEA BIVA. #400				
	Palm Beach Gardens Fl. 33418			
	•	City/ State and Zip Code	e	
	triona (	@ bernsteinta	XX.COM	
E-ma	il address: (to be us	sed for future annual report	notification)	
For further information concerning	ng this matter, plea	se call:		
Trisha Be	mstein	at (561	de & Daytime Telephone Number	
Name of Contact	Person	Arca Co	de & Daytime Telephone Number	
Enclosed is a check for the follow	ving amount made	payable to the Florida Depa	artment of State:	
	3.75 Filing Fee & tificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, Fl	rporations	Amend Division The Co 2415 N	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

## **Articles of Amendment** Articles of Incorporation

JB Insurance Group Inc.



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

### P08000061607

(Document Number of Corporation (if known)

nt(s) to

rporation," "company," or "in	The nev
rporation," "company," or "in	
viation "P.A."	corporated or the appreviation Corp., orporation name must contain the work
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ed affice address in Florida a	enter the name of the
office address:	incr me name or me
(Florida street address)	
	, Florida
(City)	(Zip Code)
stared Agent:	
am familiar with and accept th	ne obligations of the position.
	ed office address in Florida, e ffice address:  (Florida street address)  (City)

#### Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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> <u>Jol</u>	<u>hn Doe</u>	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Brenda Jaramillo	908 Penn Trl
X Add			Jupiter Fl. 33458
Remove			
2) Change			
Add			
Remove Change			
Add			<u></u>
Remove			
4) Change			
Add			
Remove			
5) Change		<del></del>	
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6) Change			
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	(Be specific)	nge(s) here:			
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. If an amendment provides for an exch	ndment if not	contained in the	amendment itself	<u>nares,</u> <u>E</u>	
provisions for implementing the ame					
(if not applicable, indicate N/A)					
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(if not applicable, indicate N/A)					

The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:		
<u></u> .	(no more than 90 days after amendment	file date)
<b>Note:</b> If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing recepartment of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors witho	out shareholder action and shareholder
The amendment(s) was/were add by the shareholders was/were sa	opted by the shareholders. The number of votes cast fulfficient for approval.	or the amendment(s)
	proved by the shareholders through voting groups. The each voting group entitled to vote separately on the a	
"The number of votes east	for the amendment(s) was/were sufficient for approva	al
by		 _'
	(voting group)	
Dated	3/30/2021	
Signature	Marjat	
	irector, president or other officer – if directors or officed, by an incorporator – if in the hands of a receiver, the	
	ted fiduciary by that fiduciary)	usice, or other court
	John P Rayrat	
	(Typed or printed name of person signing)	)
	President	
	(Title of person signing)	