## P08000105411

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Bailey Insurance G	roup, Inc.			
DOCUMENT NUM	P08000105411				
The enclosed Articles	s of Amendment and fee are sul	omitted for filing.			
Please return all corre	espondence concerning this mat	ter to the following:			
	Janet Bailey				
		Name of Contact Person	1		
	Bailey Insurance Group, Inc.				
	Firm/ Company				
	3880 S. Washington Ave., Ste.#235				
	Address				
	Titusville, FL 32780				
		City/ State and Zip Code	2		
	janet@baileyinsurancegrp.com	n			
	· ·	ed for future annual report	notification)		
For further information	on concerning this matter, pleas	e call:			
Janet Bailey		at ( 321	917-6824		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:		
S35 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)		
Mailing Address Amendment Section		Amend	Address Iment Section		
Division of Corporations P.O. Box 6327		Division of Corporations  The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

Bailey Insurance Group, Inc.			
(Name	of Corporation as current	ly filed with the Florida Dept. of State)	
P08000105411			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	Florida Profit Corporation adopts the follow	ving amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
	Corp," "Inc," or "Co".	'company," or "incorporated" or the abbrevie A professional corporation name must con 	
		N/A	
	B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		<del></del>
C. Enter new mailing address, if appl		N/A	
(Mailing address MAY BE A POST	OFFICE BOX)		
		<u></u>	
D. If amending the registered agent as	nd/or registered office ada	trace in Florida, antar the name of the	
new registered agent and/or the ne			
Name of New Registered Agent	N/A		
	(Florida st	treet address)	<del></del>
New Registered Office Address:	N/A	. Florida	
New Registered Cyffee Hadiess.		<del></del>	(ip Code)
New Registered Agent's Signature, if of I hereby accept the appointment as regis		t: with and accept the obligations of the positio	m.
, , , , , , , , , , , , , , , , , , , ,	,		

Signature of New Registered Agent, if changing

## 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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	VP	Rebecca L. Helfrick	1151 Pineridge Circle W.
X Add			Apt. H2
Remove			Tarpon Springs, FL 34688
2) Change	VP	Elena R. Kinoshita	7826 Windover Way
X Add			Titusville, FL 32780
Remove 3 ) Change			
Add			
Remove			<u></u>
4)Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
N/A (Necessary). (Be specific)	
19/7	
<del></del>	
	<del></del>
<del></del>	
	·
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	
N/A	
	<u>.</u> .
	<del></del>

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	9/14/2024	
The date of each amendment date this document was signed	•	_, if other than
date tills document was signed		
Effective date if applicable:	(no more than 90 days after amendment file date)	<del></del>
	this block does not meet the applicable statutory filing requirements, this date will the Department of State's records.	not be listed as
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without shareholder action and s	hareholder
	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)	
9/14/2	2024	
Signature	Janet Y. Bailey	
(B)	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 ppointed fiduciary by that fiduciary)	_
	Janet Y. Bailey	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

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