

PO9000016815

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

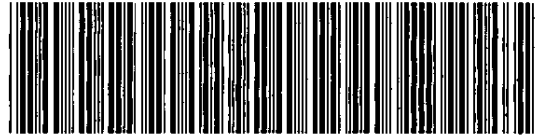
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600159106016

08/10/09--01056--024 \*\*43.75

FILED  
09 AUG 10 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

*Amend + N.C.*

C.COULLETTE

AUG 13 2009

EXAMINER

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** WARRANTY KINGDOM, INC.

**DOCUMENT NUMBER:** P09000016815

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JARED PRUZAN

Name of Contact Person

FIDELITY AUTOMOTIVE SOLUTIONS

Firm/ Company

185 NW SPANISH RIVER BLVD STE 200 B

Address

BOCA RATON, FL 33431

City/ State and Zip Code

JPRUZAN@AUTOPROTECTNOW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LES L. MOORE

Name of Contact Person

at ( 954 )

794-9716

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

**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  
Tallahassee, FL 32301



---

185 N.W. Spanish River Blvd., Suite 200B • Boca Raton, FL 33431  
Toll Free: (877) 739-4802 ext. 387 • Fax: (561) 370-6181 • Website: [www.autoprotectnow.com](http://www.autoprotectnow.com)

August 6, 2009

To Whom It May Concern:

This letter is to authorize the release of the corporate name, Fidelity Safeguard Solution, Inc. to Warranty Kingdom, Inc. as indicated in the name change amendment being filled.

I acknowledge that I have no plans to revoke the Article of Dissolution that is being filled for Fidelity Safeguard Solution, Inc. I therefore authorize the release of the name has indicated above.

Any questions, please contact me at (866)-724-0133, Ext 387.

Sincerely,

A handwritten signature in black ink, appearing to read 'Jared Pruzan', written over a horizontal line.

Jared Pruzan  
Director

Articles of Amendment  
to  
Articles of Incorporation  
of

WARRANTY KINGDOM, INC

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

P09000016815

(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:

FIDELITY SAFEGUARD SOLUTIONS, INC.

*The new*

*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)

185 NW SPANISH RIVER BLVD

STE 200B

BOCA RATON, FL 33431

C. Enter new mailing address, if applicable:

(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:

N/A

New Registered Office Address:

N/A

(Florida street address)

(City)

, Florida N/A  
(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.

Signature of New Registered Agent, if changing

FILED  
09 AUG 10 AM 9:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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)*

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
		N/A	<input type="checkbox"/> Add
		N/A	<input type="checkbox"/> Remove
		N/A	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		N/A	<input type="checkbox"/> Add
		N/A	<input type="checkbox"/> Remove
		N/A	

**E. If amending or adding additional Articles, enter change(s) here:**

*(attach additional sheets, if necessary). (Be specific)*

N/A

N/A

N/A

**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

The date of each amendment(s) adoption: 8-6-09  
(date of adoption is required)  
Effective date if applicable: 8-6-09  
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided 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/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated

8/6/09

Signature

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

JARED PRUZAN

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)