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R. WHITE.
JAN 22 2021

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Insurance 1st East	Coast Corp	<u></u>			
DOCUMENT NUME						
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	Wendie L Land					
		Name of Contact Person	1			
	Insurance 1st East Coast Corp					
	Firm/ Company					
	475 W Town Pl, Suite 205-E					
	Address					
	St. Augustine, Florida 32092					
		City/ State and Zip Cod	e			
	insurance1st@comeast.net					
	-	sed for future annual report	notification)			
For further information	n concerning this matter, pleas	se call:				
Wendie L Land		at (236-3519			
Name o	of Contact Person	at (904) 236-3519 Area Code & Daytime Telephone Number				
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	S43.75 Filing Fee & Certificate 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)			
Ame Divi P.O.	ndment Section sion of Corporations Box 6327 shassee, FL 32314	Amend Divisio The C	Address Iment Section In of Corporations In of Tallahassee In Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Insurance 1st East Coast Corp

-1, -111:09

(<u>Name</u>	of Corporation as cur	rently filed with the Flori	da Dept. of State)
P09000038086			
	(Document Numb	per of Corporation (if know	vn)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes,	this Florida Profit Corpor	ration adopts the following amendment(s) to
A. If amending name, enter the new n	ame of the corporation	<u>n:</u>	
1/0			The new
	Corp," "Inc," or "Co	". A professional corpor	orated" or the abbreviation "Corp.," ration name must contain the word
B. <u>Enter new principal office address,</u> (Principal office address <u>MUST BE A S</u>		<u>~/4</u>	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	i <mark>cable:</mark> <u>OFFICE BOX</u>)	N/A	
 If amending the registered agent ar new registered agent and/or the new 			the name of the
Name of New Registered Agent	Richard A Land		
nume of New Registered Agem	475 W Town Pl. Suite	205-E	
	(Florie	la street address)	
New Registered Office Address;	St. Augustine		Florida 32092
New Registered Office Address.		(City)	, Florida 32092
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ligations of the position.
		•	
~ 0	0. 1	0	
-Q V	V 1 2		

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)

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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	VTD	Richard A Land	475 W Town Pl Suite 205-E		
X Add			St. Augustine, FL 32092		
Remove					
2) Change					
Add					
Remove 3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change					
Add					
Remove					
6) Change					
Add					
Remove					

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
ave added a Vice President, treasure, and director to the corporation.	
	
 	
.	
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)	
Common stock shares have been transfered to Richard A Land, which now owns 100% of the stock shares of Insura	nce 1st
East Coast Corp.	.
asi Coust Corp.	

	11/28/20	020			
The date of each amendment(s) ado	ption:			, if c	other than the
date this document was signed.					
11/28/ Effective date <u>if applicable</u> :	2020				
Ellective date <u>il applicable</u> .	(no n	nore than 90 days a	fter amendment file	date)	
Note: If the date inserted in this blo- document's effective date on the Depart			tutory filing require	ments, this date will not be	e listed as the
Adoption of Amendment(s)	(CHECK	ONE)			
☐ The amendment(s) was/were adopt action was not required.	ted by the incorp	oorators, or board of	directors without sh	areholder action and shareh	older
The amendment(s) was/were adopt by the shareholders was/were suffi	•		r of votes cast for th	e amendment(s)	
☐ The amendment(s) was/were appromist be separately provided for ea					
"The number of votes cast fo	r the amendmen	t(s) was/were suffic	ient for approval		
Wendie L Land			**		
by	(voting gre	оив)	·		
	(, , , , , , , , , , , , , , , , , , ,	···•			
11/28/2020 Dated					
2.5	endio	8. Lar	d	····	
selected,		or other officer – if d tor – if in the hands at fiduciary)			
W	Vendie L Land				
_	(Typec	d or printed name of	person signing)		
p	resident				

(Title of person signing)