P09000041977

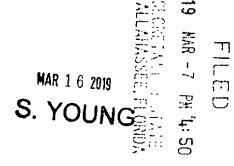
(Requestor's Name)
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<u>COVER LETTER</u>

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ELITE UNDERW	VRITERS INC			
	BER: P09000041977				
	of Amendment and fee are s				
Please return all corre	spondence concerning this ma	atter to the following:			
	IGNACIO MORENO				
		Name of Contact Person	n		
	ELITE UNDERWRITERS INC				
		Firm/ Company			
	10300 SUNSET DR. SUITE	E 470H			
	-	Address			
	MIAMI FL 33173				
		City/ State and Zip Cod	e		
imore	no@eliteunderwriters.com				
	· 	sed for future annual report	notification)		
for further information	a concerning this matter, plea	se call:			
IGNACIO MORENO		305-203 10	49,		
Name of Contact Person at (305-203-1049) Area Code & Daytime Telephone		de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	□S43.75 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		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ELITE UNDERWRITERS, INC	
	currently filed with the Florida Dept. of State)
P09000041977	
(Document Nu	ımber of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporat	tion:
	The new
name must be distinguishable and contain the word "corp" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc, word "chartered," "professional association," or the abbrevi	poration," "company," or "incorporated" or the abbreviation "," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS) 三
	一
C. Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	<u> </u>
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	ce address in Florida, enter the name of the address:
· -	
Name of New Registered Agent	
(Flo	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent
hereby accept the appointment as registered agent. I am fai	miliar with and accept the obligations of the position.
	EVI - Devise Literatura (C. I.
Signature of	New Registered Agent, if changing

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: XChange	PT	John Doe				
X Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s			
l) Change	D	JOSE M. ALVAREZ	10300 SUNSET DR SUITE 470H			
X Add			MIAMI FL 33173			
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 (Attach additional sheets, if necessar	rv). (Be specific)	AST HELE.		
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7				····
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		- -		
f an amendment provides for an o	exchange, reclassificat	ion, or cancellation o	f issued shares	
provisions for implementing the :	amendment if not cont	ained in the amendm	ent itself:	
(if not applicable, indicate N/A	1)			
				
	**			
	,			
- 10				
			H	
				

2/28/2019	
	her than
2/28/2019	
Effective date <u>if applicable</u> : (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be I document's effective date on the Department of State's records.	listed as
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 east for the amendment(s) was/were sufficient for approval	
by	
by	
☐ 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.	
2/28/2019 Dated	
(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)	
Tanded Hodows,	
(Typed or printed name of person signing)	_
- President	
(Title of person signing)	

the

the