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Special Instructions to	Filina Officer:	

Office Use Only



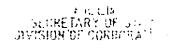
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SELRETARY OF STATE
REVISION OF CORPORATION

AUG 1 6 2018

COVER LETTER



TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

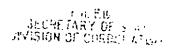
281 AUG 13 AM 11: 46

NAME OF CORPORATION:	ALEAT	AUTO	INSURA	nce	Compa	ny In	c
DOCUMENT NUMBER:							
The enclosed Articles of Amena	<i>lment</i> and fee are	submitted	for filing.				
Please return all correspondence	concerning this	matter to th	ne following:				
	VINCENT	PA	yne ne of Contact Per				
AL	NT AUTO	Nan In	Te of Contact Per	Com	PANY	IN C	
405	Y Sawy	en	Road Address				
_	MAIOTA	FL	34233			•	
E-m. For further information concerns	ail address: (to be		uture annual repo	ort notific	ation)	···	
Vincent Payne	e		at (941 Area e	, ه	52-1189	P ExT	1021
Name of Contact	Person		Area	Code & D	aytime Tele	phone Numbe	
Enclosed is a check for the follo	wing amount ma	de payable	to the Florida De	epartment	of State:		
☑ \$35 Filing Fee □\$4 Ce	3.75 Filing Fee & entificate of Status	s Ce (Ac	3.75 Filing Fee & rtified Copy Iditional copy is closed)	Ce Ce (A	52.50 Filing I ertificate of S ertified Copy dditional Co enclosed)	Status	
Mailing Adde Amendment S Division of Co P.O. Box 632	ection orporations		Ame Divi	eet Addre endment S ision of Co ton Buildi	Section orporations		

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation



of ALENT AUTO INSURANCE

2010 AUG 13 AM 11: 46 PNC

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

(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amenits Articles of Incorporation: A. If amending name, enter the new name of the corporation: Ple name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain 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) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
AGIC TWC name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbrevia "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain 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) C. Enter new mailing address, if applicable:	dmer
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(Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable:	ttion
	_
	<u> </u>
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	_
(Florida street address)	
New Registered Office Address: , Florida (City) (Zip Code)	_
New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	

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: 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>	<u>Name</u>	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
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5) Change			
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6) Change			
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If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)	·····		
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f an amendment provides for an exch provisions for implementing the ame	nange, reclassificati	on, or cancellatio	on of issued shares	1
(if not applicable, indicate N/A)	THE THE TAX COURSE			
	<u></u>		·	_
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				.

The date of each amendment(s) ac	option: 8/1/2018	, if other than
date this document was signed.	s / /a a	
Effective date <u>if applicable</u> :	$\delta / i / 2 \omega 8$ (no more than 90 days after i	amendment file date)
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutor	y filing requirements, this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of vificient for approval.	otes cast for the amendment(s)
	roved by the shareholders through voting geach voting group entitled to vote separate	
"The number of votes cast	for the amendment(s) was/were sufficient f	or approval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shar	eholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without sharehol	der action and shareholder
Dated 8/1	12018	
selected	rector, president or other officer – it lirect l, by an incorporator – if in the hands of a ed fiduciary by that fiduciary)	ors or officers have not been receiver, trustee, or other court
	(Typed or printed name of pers	on signing)
	Chief Financial (Title of person sig	MFICOL

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