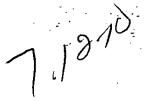
(Requestor's Name)
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PICK-UP WAIT MAIL
. (Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:



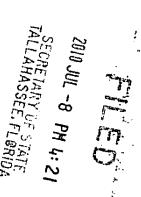




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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	GOODWAY INSURANCE CORP				
DOCUMENT NUMBER:	P09000083142				
The enclosed Articles of Amendment	and fee are submitted for filing.				
Please return all correspondence conce	rning this matter to the following:				
	WILLY FEREIRA				
	Name of Contact Person				
	GOODWAY INSURANCE CORP ,				
*: 3	Firm/ Company				
	, :				
800 E	HALLANDALE BEACH BLVD SUITE 8				
	Address				
The second of th	There were in the state of				
A CONTRACT OF THE PARTY OF THE	HALLANDALE BEACH; FL;33009				
	City/ State and Zip Code				
gov	odwovinguranco@amail.com				
E-mail address:	odwayinsurance@gmail.com (to be used for future annual report notification)				
	(
For further information concerning this	s matter, please call:				
WILLY FÉRÉIRA	at (954)367.2382				
Name of Contact Person	Area Code & Daytime Telephone Number				
	Area Code & Daytine Telephone Number				
Enclosed is a check for the following a	amount made payable to the Florida Department of State:				
☑ \$35 Filing Fee ☐ \$43.75 Filing Fe Certificate of St					
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				

Articles of Amendment to Articles of Incorporation of

SECRETARY PH 4:21

GOODWAY INSURANCE CORP

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

P09000083142

(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:

ame must be distinguishable and contain th				"incorporated"	
bbreviation "Corp.," "Inc.," or _Co.," or the a ame must contain the word "chartered," "profe					poral
			;	1 (21)	
<u>Enter new principal office address, if appli-</u> Principal office address <u>MUST BE A STREET</u>			,		
		·····			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E DAV				
in the state of th	<u>E BOA</u>)		. 1		
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. If amending the registered agent and/or re			orida, enter t	he name of the	<u> </u>
new registered agent and/or the new register	ered office addr	ess:	;		
Name of New Registered Agent:		•			
		, ,			
New Registered Office Address:	-(Florida	street addre	288)		
•				Iorida	
· 	(City)		(Zip Co		—
			4		
ew Registered Agent's Signature, if changing hereby accept the appointment as registered age			ccept the obli	vations of the r	positii
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·		i i	Search of the F	
•			ent, if changir		

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>		Address	. •	9	Typ	e of Action
<u>VP</u> · 1	DANNY PALACIOS 20515 E COUNTRY CLUB DR APT 348			Add Remove			
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The date of each amendmen	it(s) adoption: <u>0</u> 4	4/15/2010		<u> </u>	
Effective date if applicable:	04/15/2010	(date of adoption	on is required)		
	(no more than !	90 days after amen	idment file date)	1	
	•	. •	• •	į	•
Adoption of Amendment(s)	(<u>C</u> 1	HECK ONE)			
The amendment(s) was/we by the shareholders was/w			e number of vote	es cast for the amo	endment(s)
The amendment(s) was/we must be separately provide	led for each voting	g group entitled to	vote separately o	on the amendmen	•
by	cast for the attici	nument(s) was wer	"	phiorai	
<i></i>	(voting group)		•		
		. <u> </u>			
The amendment(s) was/we action was not required.	ere adopted by the	e board of directors	s without shareho	older action and s	hareholder
The amendment(s) was/we action was not required.	ere adopted by the	e incorporators wit	hout shareholder	raction and share	holder
	•	•	•	•	•
Dated_07/0)5/2010			•	
Signature ≤	any	Quell	in	i	
sel	ected, by an incor	dent or other office rporator – if in the by that fiduciary)			
	•	WILLY F	EREIRA	. ;	
	(Ty	ped or printed nan	ne of person sigr	ning)	,
	-	PRES	IDENT	1	
•	(Title (of person cianina)			