P000090253

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RETARY OF STATE

MAY 30 AM II:

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Pension Ac	tuarial Services	, Inc.
	BER: P0900009025		
	of Amendment and fee are su		
Please return all corres	spondence concerning this mat	tter to the following:	
	Lorraine Dorsa		
		Name of Contact Person	n
	Pension Actuaria	Services, Inc.	
		Firm/ Company	
	205 S 1st St, Unit	1001	
	*************************************	Address	
	Jacksonville Bead	ch, FL 32250	
		City/ State and Zip Cod	e
Lor	raine.dorsa@gma	il.com	
		ed for future annual report	notification)
For further information	n concerning this matter, pleas	e call:	
Lorraine Dors	sa	at (904	, 608-4174
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made p	payable to the Florida Depa	artment 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)
	ling Address		Address Iment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation of

13 MAY 30 AM 11: 50°

Pension Actuarial Services, Inc.

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

P09000090253

ent(s) to

(Document Number of Corpo	oration (if kr	nown)			• ,,
Pursuant to the provisions of section 607.1006, Florida Statuits Articles of Incorporation:	utes, this <i>Flo</i>	orida Profit Coi	<i>poration</i> ado	pts the follow	ving amendn
A. If amending name, enter the new name of the corpora	ation:				
Aegis Pension Services, Inc.					The ne
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	ıc," or "Co	". A professio	or "incorpor nal corporati	ated" or the on name mus	abbreviatio
B. Enter new principal office address, if applicable:					
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>2</u>)				
					
C. Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE BOX)					
,,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,, ,,					
	-				
D. If amending the registered agent and/or registered of	fice address	s in Florida, en	ter the name	of the	
new registered agent and/or the new registered office					
Name of New Registered Agent					
(f	Torida street	address)			
New Registered Office Address:			, Florida		
	(City)			(Zip Code)	
New Registered Agent's Signature, if changing Registere					
I hereby accept the appointment as registered agent. I am	familiar with	and accept the	e obligations	of the position	71.

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>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			· · · · · · · · · · · · · · · · · · ·
6) Change			
Add			
Remove			

	(Be specific)
NIA	
7-1-1	
, , , , , , , , , , , , , , , , , , , ,	
	
	hange, reclassification, or cancellation of issued shares,
provisions for implementing the amo	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
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provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:

The date of each amendment(s) ad	option: May 20, 2013
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast i	for the amendment(s) was/were sufficient for approval
by	
	(voting group)
☐ The amendment(s) was/were adopaction was not required.	pted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adopaction was not required.	pted by the incorporators without shareholder action and shareholder
Dated May 20), 2013
Signature	
· •	rector, president or other officer - if directors or officers have not been
	I, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
прроше	on transiting of time transiting,
	Lorraine Dorsa
-	(Typed or printed name of person signing)
	President
-	(Title of person signing)