

P10000004365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600163761096

02/17/10--01021--006 **35.00

10 FEB 17 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

nc
Ramen
2/19/10
TL

COVER LETTER

**TO: Amendment Section
Division of Corporations**

NAME OF CORPORATION: DT Insurance Corp.

DOCUMENT NUMBER: P1000000 4365

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DEDIE THOMPSON
Name of Contact Person

DT Insurance
Firm/ Company

652 W. Oakland Park BLV.
Address

Wilton Manor Florida 33311
City/ State and Zip Code

ddrthompson@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dede Thompson at (954) 8256173 / 954 568 7881
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department 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)

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

APPROVED
AND
FILED
10 FEB 17 PM 1:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DT Allstate Insurance Corp
(Name of Corporation as currently filed with the Florida Dept. of State)

P1000000 4365

(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:

A. If amending name, enter the new name of the corporation:

Thompson Insurance Agency, Inc. The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the 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**)

652 W. Oakland
Park Blvd
Wilton Manors
Florida 33311

C. Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

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:

DEDRIE THOMPSON
8179 N. University Dr Remains
(Florida street address)

New Registered Office Address:

Apt 96 Tamiami Pl, Florida 33331
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

[Signature]
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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
VP	Ronald Patterson	8179 W. University	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
		DR Apt 96	
		Tomman Rd	<input type="checkbox"/> Add <input type="checkbox"/> Remove
		33321	
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

Remains

E. If amending or adding additional Articles, enter change(s) here:
 (attach additional sheets, if necessary). (Be specific)

Add EFN # 27-158 7098

F. 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)

N/A

The date of each amendment(s) adoption: 01/15/2010

(date of adoption is required)

Effective date if applicable: _____

(no more than 90 days after amendment file date)

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 cast for the amendment(s) was/were sufficient for approval

by

Ronald Patterson / [Signature]
(voting group)

☐ 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.

Dated 02/11/10

Signature [Signature]

(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)

DEDRIE THOMPSON

(Typed or printed name of person signing)

President

(Title of person signing)