## P1000012349

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06/18/14--01002--011 \*\*35.00

TALL JULY 18 PH 12: 35

None Change

JUL 0 7 2014 T. CARTER

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: McLarney Enterprise Inc DOCUMENT NUMBER: P10000012349 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Bryce McLarney Name of Contact Person McLarney Enterprise Inc to become Trouble in Paradise Adjusting, Inc. Firm/ Company 9160 NW 49th Place Address Coral Springs, FL 33067 City/ State and Zip Code McLarneyadj@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954 873-1669
Area Code & Daytime Telephone Number Bryce McLarney Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & **□\$43.75** Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



McLarney Enterprise Inc.	<b></b>	14 JUN 18	PH 12: 35
(Name of Corporation as current	ly filed with the Florida Dept. of State)		•
P10000012349			
(Document Numbe	er of Corporation (if known)		•
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation	adopts the following	g amendment(s) t
A. If amending name, enter the new name of th	ne corporation:		
Trouble In Paradise Adjusting,	, Inc.		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Cword "chartered," "professional association," or	Corp," "Inc," or "Co". A professional corp		
B. <u>Enter new principal office address, if application (Principal office address MUST BE A STREET A</u>			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	E BOX)		
		··	
D. If amending the registered agent and/or reg new registered agent and/or the new registe		name of the	
Name of New Registered Agent		<del></del>	
	(Florida street address)	<u></u>	
New Registered Office Address:	, Flori	ida	
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age		ions of the position.	
Signature o	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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	<del></del>	<del></del>			
Add					
Remove					
2) Change	<del></del>	<del></del>			
Add					
Remove 3) Change					
Add					
Remove					
4) Change					
Add		_			
Remove					
5) Change		_			
Add					
Remove					
6) Change					
Add		<del>_</del>		<del></del>	
Remove					

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)				
,				
		<del> </del>		
	·			
<u>If</u>	an amendment provides for an excha provisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:		
		,		
		· · · · · · · · · · · · · · · · · · ·		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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"	
(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 6/16/2014	
Dated	
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)	
Bryce McLarney	
(Typed or printed name of person signing)	<del>,</del>
President	
(Title of person signing)	