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09/09/13--01043--001 **210.00

OCT 14 2013

R. WHITE

COVER LETTER

TO: Amendment Section Division of Corpor					
NAME OF CORPORA	ATION: HIGHPOINT IN	ISURANCE AGENCY, INC	С.		
DOCUMENT NUMBI	ER: P10000013952				
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corresp	condence concerning this mat	ter to the following:			
_	XIOMARA SPADAFORA				
		Name of Contact Person	1		
_	ZELLNER INSURANCE AGENCY, INC.				
Firm/ Company					
_	4114 SUNBEAM R	OAD SUITE 101			
		Address			
	JACKSONVI	LLE, FL 32257			
_		City/ State and Zip Cod	e		
	xiomara@zellnerinsuran	ce.com			
		ed for future annual report	notification)		
For further information concerning this matter, please call:					
XIOMARA SPADA	AFORA	at (904	7188301		
Name of	Contact Person		de & 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)		
Maili	ng Address	Street	Address		
Amendment Section			Iment Section		
Division of Corporations			on of Corporations		
P.O. Box 6327 Clifton Building			-		
Tallahassee, FL 32314		2661 E	xecutive Center Circle		

Tallahassee, FL 32301



September 17, 2013

XIOMARA SPADAFORA HIGHPOINT INSURANCE AGENCY INC 4114 SUNBEAM ROAD SUITE 101 JACKSONVILLE, FL 32257

SUBJECT: HIGHPOINT INSURANCE AGENCY, INC.

Ref. Number: P10000013952

We have received your document for HIGHPOINT INSURANCE AGENCY, INC. and your check(s) totaling \$210.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 713A00021875

Division of Compositions D.O. DOV 6207 Tallaharma Florida 2021



RECEIVED SEP 8 0 2813 GEORGE A. ZELLNER CO.

September 17, 2013

XIOMARA SPADAFORA HIGHPOINT INSURANCE AGENCY INC 4114 SUNBEAM ROAD SUITE 101 JACKSONVILLE, FL 32257

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Rebekah White Regulatory Specialist II

Letter Number: 713A00021875

Articles of Amendment

Articles of Incorporation

OCT -9 PH 2:56

of HIGHPOINT INSURANCE AGENCY, INC. (Name of Corporation as currently filed with the Florida Dept. of State) P10000013952 (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: 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) 4114 SUNBEAM ROAD, SUITE 101 JACKSONVILLE, FL 32257 C. Enter new mailing address, if applicable: SAME AS PRINCIPAL ADDRESS (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: JEFFREY L SPADAFORA Name of New Registered Agent (Florida street address) 4114 SUNBEAM ROAD SUITE 101 32257 New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Regis I hereby accept the appointment as registered ago with and accept the obligations of the position.

Registered Agent, if changing

Signati

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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	CEO	JEFFREY L SPADAFORA	4114 Sunbeam Rd Suite 101
Add			Jacksonville, FL 32257
Remove			
2) X Change	Р	JEFFREY L SPADAFORA	4114 Sunbeam Rd Suite 101
Add			Jacksonville, FL 32257
Remove			
3) Change			
Add			
Remove			
4) Change			
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n amendment provides for an exch	ange reclassifi	ication or can	ellation of issued	charec
ovisions for implementing the ame (if not applicable, indicate N/A)	ndment if not c	ontained in th	amendment itse	lf:
(y not applicable, inalcate N/A)				
			<u></u>	
				
<u> , </u>				
	·			

The date of each amendment(s)	SEPTEMBER 28, 2013	, if other than the
date this document was signed.	adoption:	, ir outer than the
Effective date if applicable:	SEPTEMBER 28, 2013	
<u></u>	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
☐ The amendment(s) was/were ac action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were accion was not required.	lopted by the incorporators without shareholder action and shareholder	
(Dated)	3/22/13	
Signature		
(By a select	director, president of other afficer - it directors or officers have not been ed, by an incorporator if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	JEFFREY L SPADAFORA	
	(Typed or printed name of person signing)	
	PRESIDENT/CEO	
	(Title of person signing)	