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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: ONE STOP INSU	RANCE INC	
DOCUMENT NUMBE	CR: P10000017290		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
<u>1</u>	HAI NGUYEN _		
		Name of Contact Person	1
<u>. C</u>	NE STOP INSURANCE I		
		Firm/ Company	
<u>5</u>	100 SUNBEAM RD STE 1	3	
		Address	
<u>J</u>	ACKSONVILLE, FL 3225	7	
		City/ State and Zip Code	
<u>1</u>	HAI.NGUYEN@BRIGHT E-mail address: (to be us	WAY.COM sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
THAI NGUYEN			710-5634
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amen Divisi P.O. B	ng Address dment Section on of Corporations lox 6327 assee, FL 32314	Amend Divisio The Ce 2415 N	Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED
2021 JUL 16 PM 12 20

ONE STOP INSURANCE INC

Check if applicable

 \square The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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

1/10000017290	
(Document Number of C	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fi</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</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 office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
Name of New Registered Agent	
	t aldress)
New Registered Office Address;(C	, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obligations of the position.
Signature of New Reg	istered 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)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	D	PETER NGYEN	5100 SUNBEAM RD STE 13
X Add			JACKSONVILLE, FL 32257
Remove			1644 INKBERRY LN
2) Change	VP	HANH TRUONG	JACKSONVILLE, FL 32259
Add			
X Remove 3) Change			
Add			
Remove			
4) Change		- -	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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	of each amendment(s) adoption: 7-1-2021, if other than becoment was signed.
Effective of	(no more than 90 days after amendment file date)
	he date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a seffective date on the Department of State's records.
Adoption	of Amendment(s) (CHECK ONE)
	endment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder was not required.
	tendment(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 am	
☐ The arr	shareholders was/were sufficient for approval. sendment(s) was/were approved by the shareholders through voting groups. The following statement
☐ The arr must b	shareholders was/were sufficient for approval. tendment(s) was/were approved by the shareholders through voting groups. The following statement e 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
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