P1000057/03

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	: #)
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04/11/12--01022--006 **43.75

DIVISION OF CORPORATION

Amend Name Acus 4.12.12

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION.		DBYACK INS., INC.			
DOCUMENT NUMBER: P10000057163	}				
The enclosed Articles of Amendment and fee are sub-	nined for filing.				
Please return all correspondence concerning this matter	er to the following:				
Carl M. Pittman					
	Name of Contact Person	1			
POB Insurance., li	nc.				
•	Firm/ Company	A particular de la constitución de			
1575 Pine Ridge F	1575 Pine Ridge Road, Ste. 16				
	Address				
Naples, FL 34109					
· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Code	2			
carl@pobins.com					
E-mail address: (to be use	d for future annual report	notification)			
For further information concerning this matter, please	call:				
Carl M. Pittman	_{at (} 239	, 777-3659			
Name of Contact Person		de & Daytime Telephone Number			
Name of Contact Person	Alea Co	de & Daytime Telephone Number			
Enclosed is a check for the following amount made pa	yable to the Florida Depa	artment of State:			
\$35 Filing Fee & Certificate of Status	S43.75 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 Tailahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle Ussee, FL 32301			

Articles of Amendment to Articles of Incorporation of

DIVISION FRANCE
12 APR // AM 8: 20
44 8: 20

PITTMAN, OSCEOLA A	'ND BOBYACK IN	IS., INC.		•
(Name of Corporation a	s currently filed with the Fl	orida Dept. of State)		
P10000057163				
(Docume	nt Number of Corporation (if	kmown)		
Pursuant to the provisions of section 607 its Articles of Incorporation;	.1006. Florida Statutes, this F	<i>Torida Profit Corporation</i> ad	opts the following amen	dment(s) to
A. If amending name, enter the new n	ame of the corporation:			
POB Insurance, Inc.			The	1127141
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	uation "Corp," "Inc." or "C	o". A professional corpora	rated" or the abbrevia	nion
B. Enter new principal office address,	if anniicable.	1575 Pine Ridge	Road	
(Principal office address MUST BE A S		Suite 16, 34109	<u> </u>	
		Naples, FI	34/09	
C. Enter new mailing address, if appl (Mailing address MAY BE A POST			***	
			······	
D. If amouding the peristaned again as	dian nagistaned nGGas addus	as in Florida and the same		
D. If amending the registered agent ar new registered agent and/or the ne		ess in Piorian, enter the nam	e of the	
ROBELT Name of New Registered Agent	Robet C. Bobyaci	k		
	1575 Pine Ridge	Road, Ste. 16		
	(Florida stre			
New Registered Office Address:	Naples	, Florida	34109	
	(City)		(Zip Code)	
New Registered Agent's Signature, if c	hanging Registered Agent:			
I hereby accept the appointment as regist		th and accept the obligations	of the position.	
	, My top			
Si	anatura of New Peristanad A	rent 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 = ChiefExecutive Officer: CEO = 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: \underline{X} Change	<u>PT</u>	John Doe	
\underline{X} Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add Remove	CEO	Q.B. Osceola, Jr.	1185 Immokalee Road Ste. 110, Naples, FL 34110
2) <u>×</u> Change Add Remove	CEO	Robert C. Bobyack	1575 Pine Ridge Road, Ste. 16 Naples, FL 34109
3) × Change Add Remove	P	Cerl M. Pittman	1575 Pine Ridge Road, Ste. 16 Naples, FL 34109
4) Change Add Remove	***************************************		
5) Change Add Remove		1_1	
δ) Change Add Remove			

The date of each amendment	t(s) adoption: U4/U9/12
Effective date if applicable:	04/09/12
<u></u>	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/we by the shareholders was/w	re adopted by the shareholders. The number of votes east for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/well action was not required.	re adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	4/9/12
Signature	201305
	By a director, president or other officer – if directors or officers have not been
	elected, by an incorporator – if in the hands of a receiver, trustee, or other court populated fiduciary by that fiduciary)
	Rober + Bobyack (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	CSO
	(Title of person signing)